



THE IMPACT OF COVID-19 ON WOMEN'S AND MEN'S LIVES AND LIVELIHOODS IN ALBANIA

Results of a Rapid Gender Assessment

This publication has been produced by UN Women Albania to assess the impact of COVID-19 pandemic on main challenges faced by women and men, and how the changing situation is affecting the socio-economic situation and livelihood of women and men. The development of this publication is supported through the technical expertise provided in the framework of the UN Women regional “Women Count” project funded by the Swedish International Development Cooperation Agency and Australian DFAT, and with the financial contribution under the UN Joint Programme on Municipal Social Protection funded by the Global SDG Fund and the UN Joint Programme on Ending Violence Against Women funded by Sweden.

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EXECUTIVE SUMMARY

The first case of COVID-19 in Albania was registered on March 9th, 2020 and on March 12th, the Government of Albania introduced the first restrictive measures to stop the human transmission of COVID-19.

After two weeks, on March 24th, a state of emergency was declared for 30 days, and later extended to remain in force until June 23rd. On April 26th, Albania confirmed 31 deaths including 11 women and 20 men, and among the 736 persons infected, 371 were women and 365 were men. As of July 31st, 2020, the number of individuals infected with COVID-19 is reported to be 5262 individuals, out of which 41% are active cases (2167 individuals), 51% of infected individuals successfully recovered, while death rate was reported to be 3% of infected individuals (or 154 individuals).

In preparation for COVID-19 response, the UN Women Europe and Central Asia Regional Office (ECA RO) under the Women Count Global Program developed and implemented a Rapid Assessment Tool to assess the impact of coronavirus on women and men, including economic hardship, difficulty in livelihood activities and personal vulnerabilities. As such, a Rapid Gender Assessment (RGA) Survey was implemented in Albania by UN Women Albania in partnership with IDRA Research & Consulting. The survey was administered on a national scale between the 17th to 26th of April 2020, with around 1300 persons interviewed using computer assisted telephone interviews (CATI). Key findings of the assessment indicate that,

Traditional media was the main source of information regarding COVID-19, with 80% of women and men deeming the information clear and helpful. Survey results showed that most of the respondents relied on traditional media as the

main source of information on COVID-19, such as television, radio, or printed media. Women were inclined to use internet and social media more frequently than men (32% compared to 28%) as a primary source of information. Young women and men up to 35 years of age mainly used internet to keep themselves informed while older respondents relied on conventional means of information, such as television and printed media. Regardless of the age or location, 80% of respondents were satisfied with the information they received on COVID-19. A moderate share of the surveyed population (14%), mostly living in urban areas, reported that the information received was confusing or contradictory.

Young women faced severe economic hardships, with less than 5% of women and men receiving paid leave. The closure of non-essential businesses had an immediate impact on numerous industries, given that almost 15% of respondents indicated they lost their jobs. Men faced greater risk of unemployment compared to women (17% vs.12%) partly due to a large proportion being employed in construction, manufacturing and other highly cyclical sectors. The highest risk of unemployment was faced by respondents in Tirana, especially among young women 18-24 years of age and women aged 45-54 years. Overall, 3.8% of employed women and 2.9% of employed men were given paid or partially paid annual leave. An equal proportion of 3.8% employed women and men reported unpaid leave during the lockdown period. The risk of unemployment among this group of affected individuals is high, potentially, in a prolonged pandemic situation.

Both employed and self-employed women faced economic destitution, with more women now working from home and paid fewer hours.

Mostly as a result of confinement measures, employment and working conditions have altered. Many institutions and businesses have adopted work from home and telecommuting options as 40% of respondents reported switching to new working arrangements. For instance, every second employed woman (51%) was working remotely compared to almost every fourth man (27%). Furthermore, 58% of respondents reported reductions in paid work hours with the most affected individuals being self-employed respondents, including a great number of women who are working as own-account workers. Overall, the share of women with reduced work time exceeded that of men by 4.7 percentage points for employed workers and by 2.8 percentage points for self-employed individuals.

Employed women in the 55-64-year age group were more likely to experience a decrease in work hours (40%) and self-employed women in the 45-54-year age group reported the highest (66.7%) among women experiencing a decrease in work hours. Among self-employed women, women living with children (46%) faced reduced work hours mainly due to care and household responsibilities. Thus, regardless of the status in employment, women are more exposed to challenges associated with decrease in work hours and potential loss of income.

Both women and men have experienced a high burden of unpaid domestic and care work, with women performing more time and care intensive tasks.

The coronavirus containment measures significantly increased unpaid domestic and care work for both women and men. Yet, the burden of “invisible work” carried out by women is more apparent and women are more likely to continue to perform the bulk of household chores and care work. RGA data shows that 76% of women reported an increase in providing unpaid domestic work and 72% of women reported that they experienced an increase in unpaid care work. Notably, the share of men with increased time on

unpaid domestic and care work is also rather high, at 66% and 62%, respectively. Increase of time spent on unpaid care activities for households with children is almost double that of households without children. The same pattern was observed for households with elderly individuals. The top three activities undertaken by women are cleaning, cooking/serving meals and caring for children, while the three top activities undertaken by men include shopping, cleaning, and house management, such as paying for bills.

More women are helping their husbands/partners with domestic household chores and care work.

Generally, the role and engagement of both partners within the household has increased; however, the increase is clearly disproportionate towards women. For instance, 46% of women and 67% of men surveyed reported they were receiving more help from their partners concerning household chores and other family responsibilities. The share of women reporting to be on their own dealing with household chores was 8%, which is double to that of men. The share of households receiving external/paid help was reported very low and was similar across urban and rural areas.

Women have been hard hit by a loss of income from livelihood resources.

RGA data shows that both women and men experienced significant changes in availability of personal income generating resources. Survey respondents reported to experience a decrease in income from different sources, such as paid employment, farming, remittances, investments and savings. For instance, the share of women reporting a loss of income from remittances was 74%, and 83% of women receiving income from personal savings or investments declared a decline from this type of income. On average, every second person reported a decrease of earnings from employment, while two-thirds experienced a loss of income from farming. Women appear to have been supported relatively more, when compared to men, from an increase of social transfers, in-kind support from government or family, and relatives. Social transfers, such as pension or other

social payments, government support or in-kind support from charity has not been affected by COVID-19. Only 35% of women and men believe that they will receive their salary if COVID-19 lockdown continues, whereas only 22.4% women and men expect to receive a partial wage. A similar proportion of respondents, women and men, expect to receive no salary at all (21.5%), while 21.1% of individuals reported that they do not know what will happen.

A considerable proportion of women faced psychological and mental health issues as a result of the uncertainty created by the pandemic. RGA data shows that the psychological and mental health of women was affected at higher rates compared to men, mostly due to stress and anxiety (69% vs. 57%). Notably, women in the active working age group, 35-44-years, experienced even higher psychological distress at a prevalence of 72% compared to 58% among men in the same age group. The reason behind this result may be the increased burden of unpaid care work for women compounded with a potential loss of jobs and related financial distress. The proportion of women aged 65+ years in rural areas also experienced higher emotional problems than women in urban settings (77% vs. 50%). This may be explained with the condition of elderly women in rural areas who are often living alone with their adult children in migration. The fear of facing health problems in solitude, concerns over their children's health and the difficulty to understand the current situation is driving these emotional problems. Women who reported 'felt/heard an increase in domestic violence' also reported a higher impact of the pandemic on their psychological and mental health when compared to men in both urban and rural areas.

One in every two women reported challenges in accessing medical supplies and one in every five reported difficulty in accessing health services. Accessing basic health services during the pandemic was compromised to a certain extent due to rapid increases in demand for health services and medical supplies. Almost every fifth respondent mentioned major or some difficulties

in seeking health services and women reported more frequently than men facing challenges in buying medical supplies, (51% compared to 43% men). This difficulty was reported at higher levels among women in urban areas and young women in the 18-24-years age group. In addition, the assessment revealed that access to essential sexual and reproductive health services (SRHS) became more difficult given travel restrictions and lockdown of clinics and other service centers. Data shows that in Albania about 5% of women experienced some difficulties in accessing gynecological and obstetric care services. The difficulties to access basic health services coupled with higher psychological and emotional stress may negatively affect women's future health outcomes in both the short-term and long-term.

More women than men expressed fear that they would not be able to buy food or pay for basic expenses including rent and utilities. The coronavirus pandemic has brought not only fear, emotional stress, and a loss of income, but also uncertainty and financial insecurity in sustaining basic needs. Overall, 71% of respondents reported concerns over their ability to cover basic expenses including food and hygiene products if restrictive measures continue. Almost 74.2% of respondents indicated that they most probably would not be able to pay for rent and utilities. The economic insecurity will particularly impact women and women headed households, who will face difficulties in paying for rent (85%), while keeping up with basic expenses will be a real challenge for another 80%. To respond to these challenges, women reported they will rely mainly on support from relatives (72%) and/or local authorities (66%), while 63% are expected to take loans to recover the loss of income during the coronavirus pandemic. Women in urban areas and those living in households with children have higher odds of feeling more uncertain about their ability to afford the needs of their families, compared to men or women from other demographic groups. As a consequence, women from those particular groups reported a higher need for support by either friends, the Government, or financial institutions.

BACKGROUND CONTEXT AND OBJECTIVE OF THE RAPID GENDER ASSESSMENT

On March 8th, 2020, the first person was diagnosed with coronavirus in Albania. On March 24th, the Council of Ministers declared a 'state of natural disaster' across the country for a period of 30 days, which was later extended by two more months, until June 23rd, 2020.

On June 1st, Albania opened borders with all neighboring countries. As of June 9th, the number of new cases started rising putting the de-confinement process into question. As the situation continued, on June 19th, the government announced an increased monitoring of the measures (keeping distance, wearing masks, etc.) and a zero-tolerance policy towards those who fail to comply.

The pandemic situation is deepening preexisting inequalities, exposing vulnerabilities in social, political, and economic systems which in turn amplify the negative impact of this crisis. Negative impacts are felt especially by women and girls who are generally earning less, saving less, and holding insecure jobs or living close to poverty. Unpaid care work has increased, with children out-of-school, heightened care needs of older persons, and overwhelmed health services. As the COVID-19 pandemic deepens economic and social stress coupled with restricted movement and social distancing measures, gender-based violence is increasing exponentially. The shocks

on labor income will also be particularly hard on those working in the informal sector, usually self-employed or working for small informal firms.

It is thus of crucial importance for the government and other stakeholders, in particular for UN agencies to understand the particularities of the impact of COVID-19. This information will serve in designing programs and support measures of relevance to the situation and problems being faced by families, businesses, young people, women and men, boys, and girls. This Rapid Assessment Survey aims to identify the livelihood challenges faced by women and men and assess how these challenges can be mitigated by the government of Albania and other related stakeholders including UN agencies, civil society and international organizations. The report presents first the methodology, followed by an analysis of the results of the survey results. Main findings and concluding remarks are summarized for reference, while extensive detailed appendices with descriptive statistics and cross tabulation are added at the end of the report.

METHODOLOGY

This report is based on a national scale survey of women and men, on the impact and hardships they experienced due to COVID-19.

The survey was conducted between 17 and 25 April 2020, roughly a month after the first person was diagnosed with COVID-19 in Albania. The population of the survey consisted of adult individuals, men and women aged 18-65 years old. The sample size is 1300 individuals, while the sampling technique used is a stratified sampling with strata defined at regional level. The sample distribution mimicked the population distribution properties, which were drawn from the national statistics as provided by the National Institute of Statistics in Albania (INSTAT). The sampling quotas per each strata and their distributional properties per gender and age categories are summarized in the Appendix (see Appendix 1, table 1, 2 and 3). With 1300 interviews, the sample has national representativeness and provides reliable results for the whole respondents, women and men, with a margin error of ± 2.72 at a 95% confidence interval.

The survey was implemented by IDRA, and questionnaires were filled out through Computer Assisted Telephone Interviews (CATI). The sampling identification procedure for CATI surveys requires usage of the national phone book, from which individuals could be identified and selected randomly within strata. The national phone book does not exist for Albania, hence in substitute IDRA used an algorithm which generates random mobile phone numbers. Mobile phone lines are used as they ensure full coverage of the national territory, land line phone coverage is very low at national scale (only 30% of households are covered by fixed line). Once the number was generated, there was a quick “screening” questionnaire for

the respondents to see whether the randomly selected individual fits the sampling criteria, including:

- ◇ The geographical location (Municipality)
- ◇ Urban/Rural
- ◇ Gender
- ◇ Age

Once the screening was processed and the selected individuals fits the sampling parameters, the main interview was conducted. Data entry and quality check were performed after surveys were completed.

Demographic and Socio Economic characteristics of the surveyed population

The Rapid Gender Assessment Survey on the Impact of Covid-19 was a nationwide survey. Overall, 1300 individuals responded to the questionnaire, with 50.3% of women respondents, and an overall sample average age valued at 41.1 years old. The distribution of sample per age groups mimics the distribution of the national population. The two largest age groups were those of ages 24-34 and 55-64 years old, with a share of 22.9% and 20%, respectively. Youth population represents 15.5% of the sample, elderly people (age above 64) are only 5% of the surveyed population.

All districts are represented in the sample distribution as per their share in total population.

The central region, which consist of the Tirana and Elbasan districts represent 42% of the whole sample size, northern regions represent 28% of the surveyed individuals; and the southern region share of the sample is 30% (see figure 3). The

urban population represents 59% of the sample, while representatives from rural areas make up 41% of the total surveyed individuals (see figure 2, Appendix 2 for district distribution of survey sample).

Figure 1: Sample Regional distribution

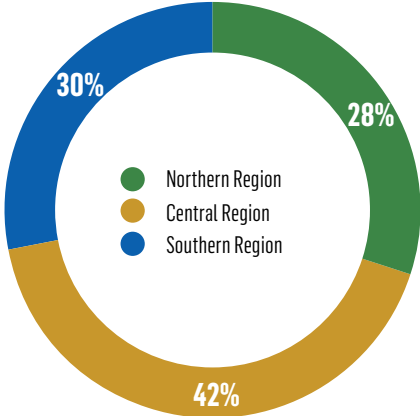
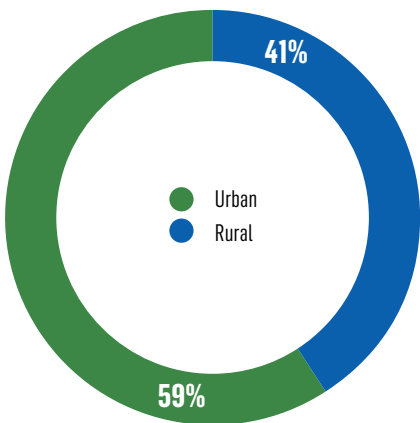


Figure 2: Sample Urban/Rural distribution



67% of interviewed individuals were married, 2.6% of individuals report to be cohabitating with a partner, 26.5% reported to be single, while the share of divorced/separated or widowed individuals is reported to be 4.5% of the total survey population. Among all respondents, 43.7% were the head of their households, while the rest of the respondents were members of a household. The share of women reported to be living with a partner is almost double that of men. Women

also have a higher prevalence of being widowed/separated or divorced if compared to men (see table 1).

Only a very small share of respondents reported to have not completed formal education. 25.2% of individuals observed have completed primary education (up to 8/9 years of education); 40.1% of them reported to have completed secondary education (up to 12 years of education); and

Table 1: Marital status of surveyed population

Marital Status	Sample (in no)	Sample (in %)	Men	Women
Single	345	26.5%	28%	25.1%
Married	871	67%	69.7%	64.4%
Living with partner/Cohabiting	26	2%	1.70%	2.3%
Married but separated	3	.2%	0%	0.5%
Widowed	36	2.8%	0.5%	5%
Divorced	19	1.5%	0.2%	2.8%

Table 2: Sample distribution per educational level

Education Category	Sample (in no)	Sample (in %)	Men	Women
No education	15	1.2%	1.1%	1.2%
Primary	327	25.2%	24.3%	26%
Secondary	528	40.6%	48.1%	33.2%
University or equivalent	430	33.1%	26.5%	39.6%
Widowed	36	2.8%	0.5%	5%
Divorced	19	1.5%	0.2%	2.8%

33.1% of the whole sample surveyed individuals have completed tertiary education.

Only 4.2% of households live in a single member household. On average, families reported to have one child and three adults, while one family in three had elderly members over the age of 65 years. 41.2% of households reported to have children and 13% of individuals surveyed reported to live with a family member with severe or moderate special needs. (see table 3)

The COVID-19 lockdown did shortly follow the earthquake of November 2019 which claimed 51 casualties, and an economic damage of

300 million Lek. The Albanian government was on the verge of initiating the reconstruction plan for all people affected by the earthquake when the COVID-19 health pandemic situation started. However, many families are still living in temporary premises, making the lockdown more difficult compared to the general population. Overall, 15.8% of the surveyed individuals report to have damages at their premises, and only 2.9% declared that they became unemployed after the earthquake. The prevalence of women experiencing damages in their premises due to earthquake is higher, while men report a stronger negative impact on their employment due to the earthquake. (see table 4)

Table 3: Sample distribution per type of households

		Overall (in no.)	Overall (in %)	Men (in %)	Women (in %)
Who do you live with?	I live alone	55	4.2%	3.6%	4.9%
	I live with children, adults and elderly	1245	95.8%	96.4%	95.1%
How many people with special needs live in your household?	No one	1131	87%	87.8%	86.2%
	There is someone with severe/moderate needs	169	13%	12.2%	13.8%

Table 4: Earthquake damages among surveyed population

Impact of Earthquake	Category of answers	Overall (in no.)	Overall (in %)	Men	Women
Was your house damaged by November 2019 Earthquake?	Yes	206	15.8%	14.1%	17.6%
	No	1090	83.8%	85.6%	82.1%
	Don't know	4	.3%	0.3%	0.3%
Did you lost your job due to November 2019 Earthquake?	Yes	38	2.9%	4.2%	1.7%
	No	857	65.9%	69.5%	62.4%
	I was not employed/ at work	405	31.2%	26.3%	35.9%

Table 5: Distribution of surveyed population per income level categories

Category of answers	Overall	Men	Women
Less than 5 000 Lek	4.2%	3.9%	4.4%
5 001 up to 10 000 Lek	5.8%	5.9%	5.8%
10 001 up to 25 000 Lek	17.7%	16.1%	19.3%
25 001 up to 50 000 Lek	35.2%	37.3%	33%
50 001 up to 100 000 Lek	24.8%	24%	25.5%
Over 100 000 Lek	5.5%	6%	5%
Refuse to answer	4.6%	4.6%	4.6%
I do not know	2.2%	2.2%	2.3%

ANALYSES OF SURVEY RESULTS

Public Awareness and Information on COVID-19 Pandemic

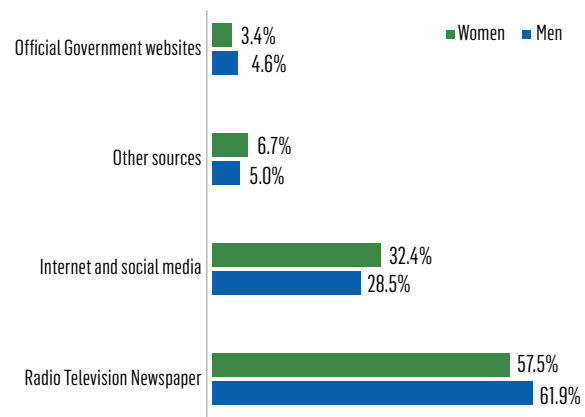
Main sources of information on the COVID-19 pandemic, which covered the spread and signs of the disease, sources of medical support, and measures taken to prevent its spread were received mainly through radio, television and newspapers. Overall, 59.7% of the surveyed population reported this category of mass media as their main source of information. Another 30.5% of the interviewed individuals reported that the internet and social media were their main source of information regarding COVID-19.

When comparing information sources by gender, women used internet-based information sources slightly more, while men have a stronger preference for information that flows through classical mass media channels such as television, radio, and newspapers. Women reported to have a higher preference for being informed through official announcements, while men prefer visiting websites of public institutions. Sources of information on COVID-19 such as family doctors, friends/families, or NGOs have been reported to be a reference for only 2.2% of the respondents. This is affected by the social distancing measures or the nature of information.

The information received during the pandemic was perceived to be clear and helpful by 80.8% of the population. Information covering the symptoms, groups at higher risks, health treatment, preventing measures, lockdown rules and government support were clearly transmitted to the wider public and considered helpful in dealing with the situation.

Slightly more women found the information clear and helpful. The proportion of individuals,

Figure 3: Main source of information on COVID-19, by sex



men and women, who found the information confusing or contradicting is 14.1% of the surveyed population. Around 5% of the respondents found the information clear, but not helpful in preparing them to face COVID-19 related challenges. The information was perceived as not helpful because it was not provided at the right time. Men reported at a higher rate that the information was not received in a timely manner to prepare oneself for the impact.

Impact of COVID-19 on economic resources, businesses and employment

Economic activity after COVID-19 experienced strong adjustments, which sometimes caused traditional activity to stop or alter operations in order to mitigate the effects of the pandemic. The shifting of economic activities caused an immediate surge in unemployment. In order to measure the potential impact of COVID-19 on employment, the survey involved questions regarding pre- and post-COVID-19 employment

Table 6: Perceived Level of Clarity and Helpfulness of the Information on COVID-19

	Overall	Men	Women
Clear and helpful in taking measures	80.80%	79.30%	82.30%
Clear, but it came too late for me to prepare	4.90%	6.10%	3.70%
Confusing/contradictory	14.30%	14.60%	14.10%

Table 7: Employment status before COVID-19, by gender

	Overall	Men	Women
I worked for a person/company/institution	41.5%	43.7%	39.3%
I had my own business/Freelancer and I employed other people	3.5%	4.6%	2.3%
I had my own business/Freelancer, but I did not employ other people	9.4%	11.3%	7.5%
I helped (without pay) in a family business	8%	1.1%	5%
I did not work and I was not looking for a job and I was not available to work	13.4%	9.4%	17.3%
I did not work, but I am looking for a job and I am available to start working	14.2%	17.2%	11.3%
I am retired, pensioner	8.6%	5.6%	11.6%
I did not work because I am studying full time	6.5%	4.8%	8.1%
I have a long-term health condition, injury, disability	2.2%	2.3%	2.1%

situations. As such, 41.5% of the interviewed individuals reported that they were employed before the pandemic and 12.9% of the respondents declared they were running their own businesses. From those running a business or engaged in freelance activities, 3.5% declared to run economic activities and employ people, while 9.4% of business owners were running family businesses.

The share of women in employment or business is lower than that of men by 4.3 percentage points (pp). The prevalence of women running a business is 5.9 percentage points lower, or one-third of men's prevalence in owning a business. The share of individuals reporting to be engaged in unpaid family business work is very low given that 1% of the surveyed population reported to work under such arrangements. This contradicts evidence from studies on the labor market which conclude that this type of employment is very common among informal employment, agriculture and farming, as well as family businesses (Shehaj, E and Agolli, M, 2018).

Overall, 13.4% of the respondents declared to not be participating in the labour market, where the share of women not in the labour market is almost double that of men, differently from unemployment where men declare a higher rate of unemployment if compared to women. Women unemployment is mostly due to non-participation or self-exclusion from the labour market. Women report a persistently high rate of non-participation in the labour market for any age group, with a strong rate of non-participation observed for women of ages 25-34-years old and 45-54 years old.

Non-working individuals such as students represented 6.5% of the total surveyed respondents, among which the share of women was higher than that of men (8.1% vs. 4.8%). Retired respondents represented 8.6% of the sample, with women being almost double that of the retired men in the sample. 2.2% of individuals surveyed do not work due to health conditions, being that disability, injury or other health conditions (see table 7).

Table 8: Distribution of employment per sectors

Sectors	Overall sample (in %)	Men (in %)	Women (in %)
Agriculture	8.8%	11.4%	5.7%
Industry/Manufacturing	8%	10.1%	5.4%
Fashion (clothes/shoes) industry	4%	1.6%	6.9%
Construction	6%	9.6%	1.6%
Commerce	8.7%	8.3%	9.1%
Service (Restaurants, Hotels, Professional services, Call centers, etc.)	29.3%	29.9%	28.7%
Transportation/communication	7.3%	9.9%	4.1%
Financial sector (including real estate)	3%	1.3%	5%
Education / health	11.5%	5.5%	18.9%
Public sector (other than education/health)	12.8%	12.5%	13.2%
Other (specify)	6%	0%	1.3%

Surveyed individuals that declared to be working or running a business before COVID-19 were asked to indicate the sector in which they worked or operated their business. The largest share of employment/self-employment is reported in the service sector, where 29.3% of employed/self-employed individuals declared to work in tourism, professional services and call centers. This sector appears almost equally important for employment of both women and men.

Industry/manufacturing and agriculture provided employment/self-employment to 8% and 8.8% of the surveyed respondents, respectively. Both sectors are reported to be male dominated in terms of employment/self-employment, as women's share in the employment/self-employment in both sectors is reported to be half of the men's rate. The health/education and financial sectors, are women-dominated, which are also mainly public sectors. Health and education sectors employ 11.5% of the employment/self-employment respondents. This sector offers employment to 18.9% of the employed/self-employed women and only 5.5% of the men. The rate of women employed in the financial sector is almost four times the propensity of men reported to be employed/self-employed in this sector. Our sample has only

3% employed individuals in the financial sector. Commerce and trade offers employment to 8.7% of the sample of employed individuals, transport and communication employees 7.3% and construction 6%. These three sectors have a higher propensity of employment of men vs. employment of women – this is especially strong for the construction and transport sectors, two non-traditional sectors for women's employment.

The Impact of COVID-19 on Employment

Employed and self-employed individuals were asked to respond to the impact of COVID-19 on their paid work hours. Overall, 42.9% of surveyed individuals responded that they experienced on change in their working hours, with men and women having similar experiences. However, a share of 55.5% of those employed or self-employed have been impacted by COVID-19. Among the impacted individuals, only 3.9% experienced increased work hours, presuming they did also not experience a negative shock on income. 51.9% of the surveyed population experienced a negative impact on paid work hours, from reduction to a complete loss of their jobs.

Table 9: COVID-19 impact on employment and working hours (N=694)

Categories of answer	Overall	Men	Women
Increased	3.90%	3.40%	4.50%
No change/It is the same	42.90%	42.10%	43.90%
Decreased, but I didn't lose my job/did not shut down my business	29.40%	28.20%	30.90%
I have had to take a full paid leave	2.20%	1.60%	2.90%
I have had to take a partially paid leave	1.20%	1.30%	1.00%
I have had to take a unpaid leave	3.90%	3.90%	3.80%
I lost my job	15.00%	17.40%	12.10%
I do not know	1.60%	2.10%	1.00%

Table 10: Distribution of COVID-19 unemployment per sector and gender

	Overall	Men	Women
Agriculture	2.9%	3.1%	2.6%
Industry	9.8%	12.5%	5.3%
Active Processing Industry (Fason)	4.9%	1.6%	10.5%
Construction	13.7%	21.9%	0%
Commerce	2%	1.6%	2.6%
Service	50%	35.9%	73.7%
Transportation/IT	11.8%	17.2%	2.6%
Financial sector	1%	1.6%	0%
Education / health	2%	1.6%	2.6%
Public sector	2%	3.1%	0%

Among those experiencing negative impacts to paid work, 29.4% experienced a reduction, among whom the share of women is slightly higher than that of men. 3.4% of the employees were given paid or partially paid annual leave, with similar prevalence among women and men. 3.9% of employees who have taken unpaid leave are suffering loss of income, while having an arrangement to get the job back after the lockdown measures have ended.

The proportion of individuals that reported to be unemployed due to COVID-19 is 15% of the total employed and self-employed individuals. Having a national representative sample, the sample prevalence of COVID-19 unemployment was used to estimate the number of individuals that lost their jobs. Albania reported a total of 516 thousand individuals employed in the non-public, non-agriculture sector, with an estimated 97 thousand

people unemployed, from which 27 thousand have only lost their income with the promise to get their jobs back after the pandemic situation ends. Among the unemployed individuals, 34 thousand are estimated to be women.

Among others, the service, construction, transportation, communication, industry, and manufacturing sectors suffered negative impacts due to COVID-19. Women's unemployment is primarily reflected in the service sector, where women account for 73% of job losses, followed by the active processing industry which reports a job cut of 10.5% to women's employment.

The highest share of job losses due to COVID-19 is reported in the region of Tirana, for both men and women. Among the regions, women's job losses were more prevalent than men's job losses in Vlora, Lezhe, Fier and Durres. Disaggregated by

Figure 4: Distribution of COVID-19 unemployment per sector and gender (%)

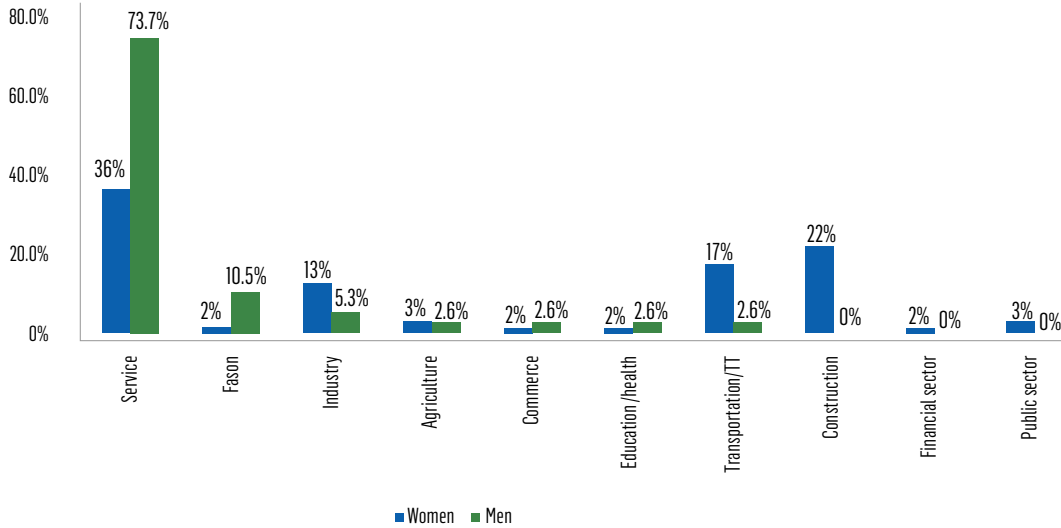


Figure 5: Distribution of COVID-19 job loss per regions and gender

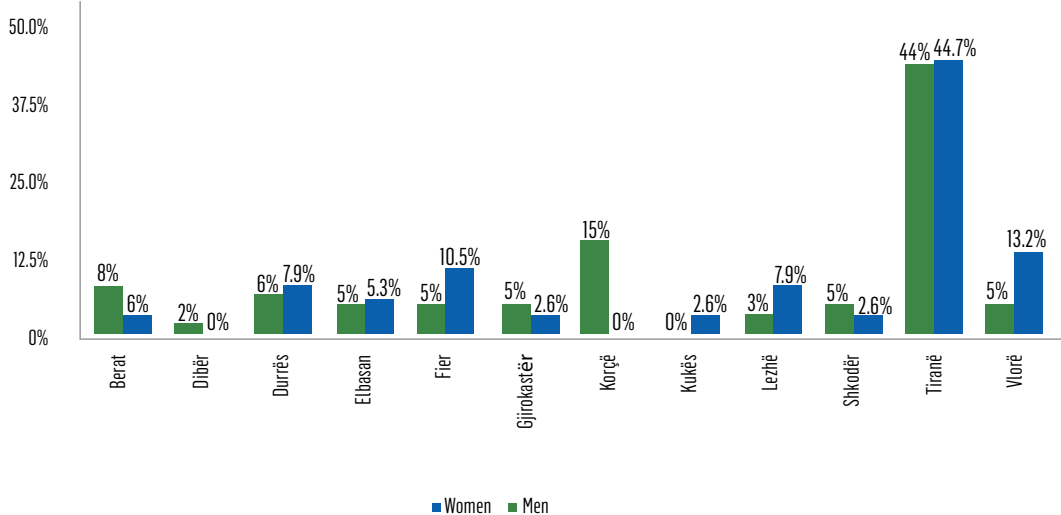
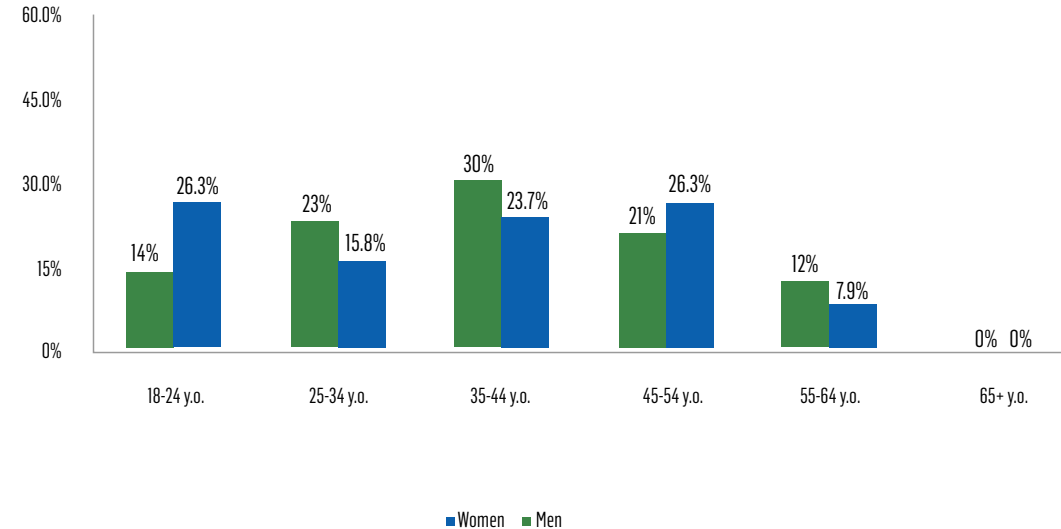


Figure 6: Distribution of COVID-19 job loss per age-group and gender



age groups, the job loss prevalence for women has been reported higher among women from the 18-24 years and 45-54 years age groups. Women living in households with an average monthly income of 25 001 to 50 000 ALL have reported the highest prevalence of job loss due to COVID-19.

As a result of prevention measures, 42% of the respondents reported no changes to their paid work hours. Those mostly affected are self-employed respondents, with almost every second person in a situation of reduced working hours resulting from closure of non-essential businesses. This includes a great number of women who are working as own-account workers (beauty industry, local markets, etc.). However, the RGA has highlighted the disproportionate impact of lockdown measures on paid work hours for employed women. The share of women who had to reduce working time exceeded that of men by 4.7 percentage points for employed workers and by 2.8 percentage points for self-employed workers.

94% of employees confirmed that the employer paid social benefits. The negative impact on their working hours, unpaid leave, or job cuts mean that they will also experience a loss of social benefits. While this may not be a problem in the short term, a prolonged loss in social benefits would mean that the COVID-19 impact will be strong and lasting not only on the health system but also on social protection of individuals.

Employed women in the 55-64-years age group were more likely to experience a decrease in working hours (40%). Similarly, self-employed women in the 45-54 years age group reported the highest proportion (66.7%) of women experiencing a decrease in working time (Figure 8). Working time has decreased for employed women living in households without children (32%), which explains the age pattern of working time decrease among employed women (figure 8). It is the youngest and the oldest age groups of employed women experiencing the highest decrease in working time.

Figure 7: Distribution of COVID-19 job loss per household income category and gender

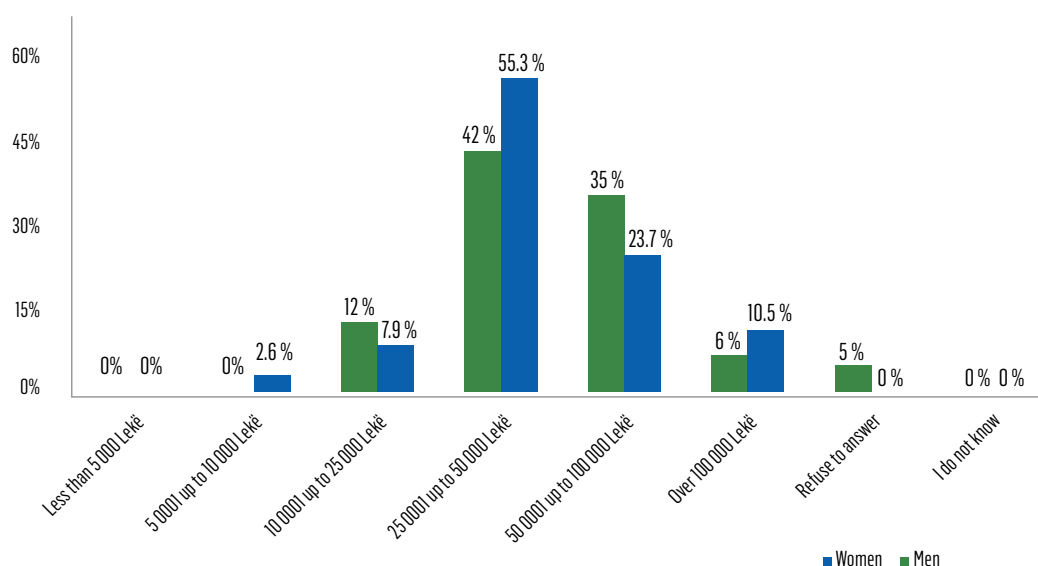


Table 11: Social benefit coverage of employed/self-employed individuals (N=446)

Does your employers pay social benefits?	Overall	Men	Women
Yes	93.7%	93.8%	93.7%
No	3.8%	4.9%	2.7%
Don't know	2.5%	1.3%	3.6%

Figure 8: Proportion of respondents reporting a decrease in their work time due to COVID-19, by household type and sex

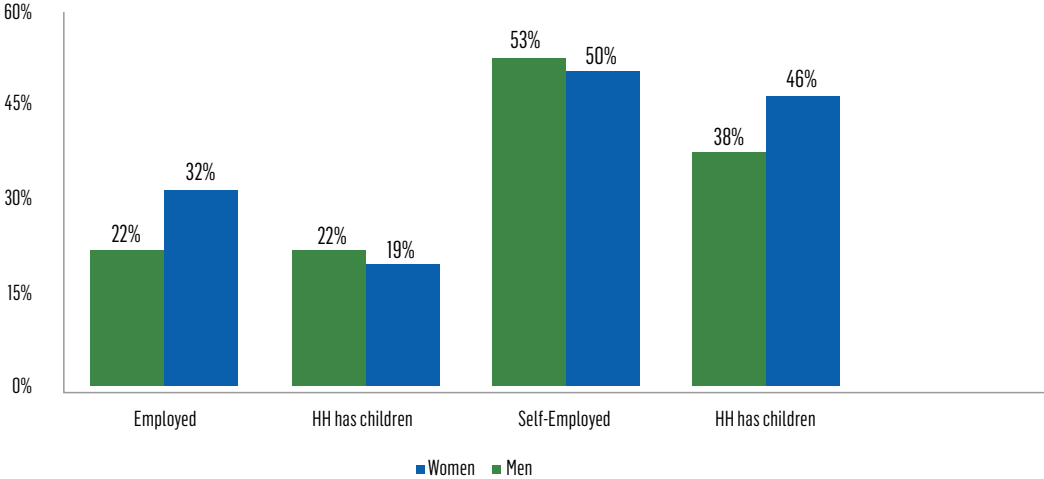
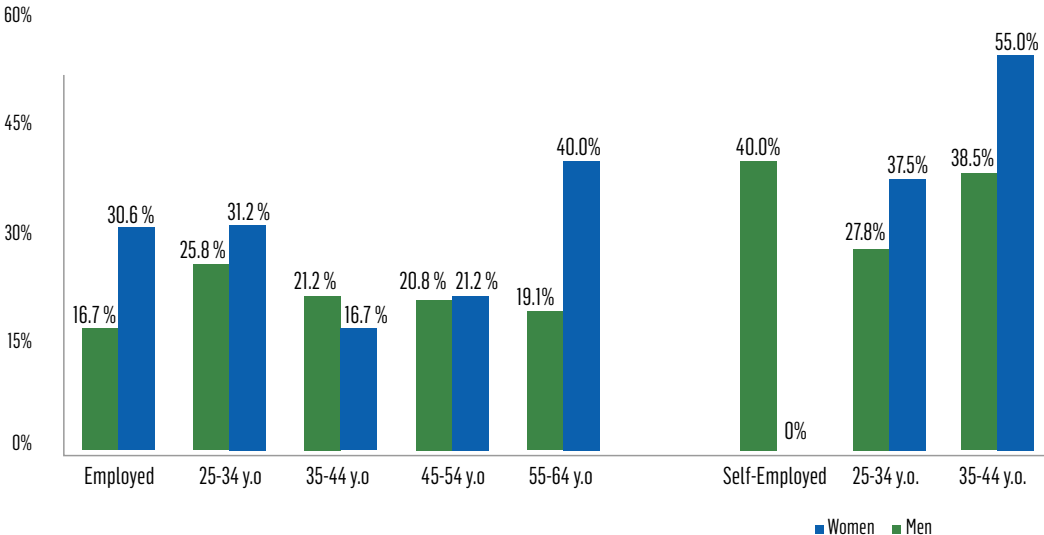


Figure 9: Proportion of respondents reporting decrease in work time due to COVID-19, by age group, employment status and sex



Among self-employed women, it is those living in households with children (46%) that are cutting their working time, mainly to take responsibility over children or housework. Most self-employment occurs in subsistence family businesses, leading women to cut on working hours and spend more time in domestic work or care. Thus, regardless of the status in employment, women are more exposed to unexpected challenges associated with decrease in working hours and potential loss in income.

The closure of non-essential businesses had an immediate impact in some industries, and almost 15% of the respondents lost their jobs. Men faced a greater risk of unemployment (17%)

compared to women (12%), partly due to a large proportion of men being employed in construction, manufacturing, and other highly cyclical sectors. In addition, 3.8% of women employees and 2.9% of men employees were given paid or partially paid annual leave. An equal proportion of 3.8% employed men and women reported unpaid leave during the lockdown. These groups within the respondents are among the most vulnerable as they might potentially be pushed into unemployment depending on how the economic situation will evolve in the near future.

For people still working during COVID-19, the working arrangements, place and conditions

Figure 10: Changes in work arrangements due to COVID-19

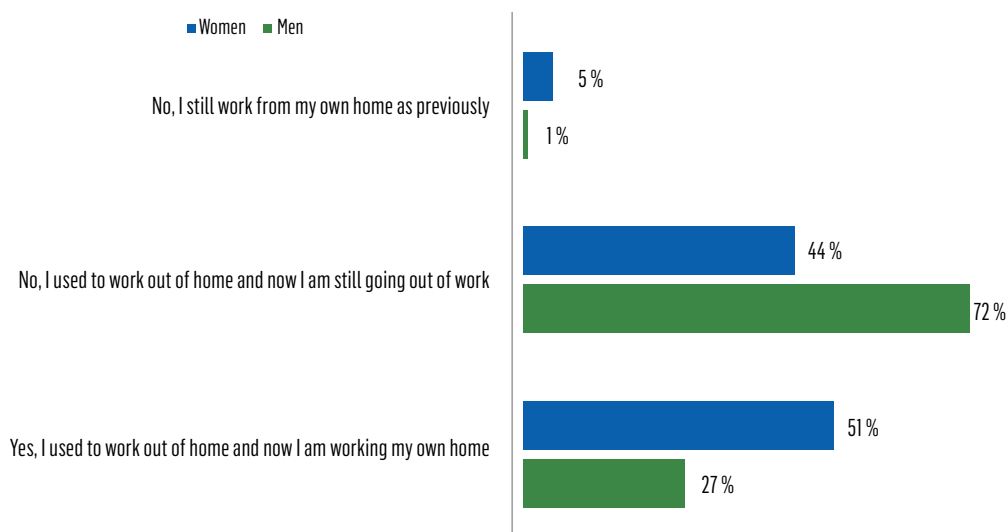
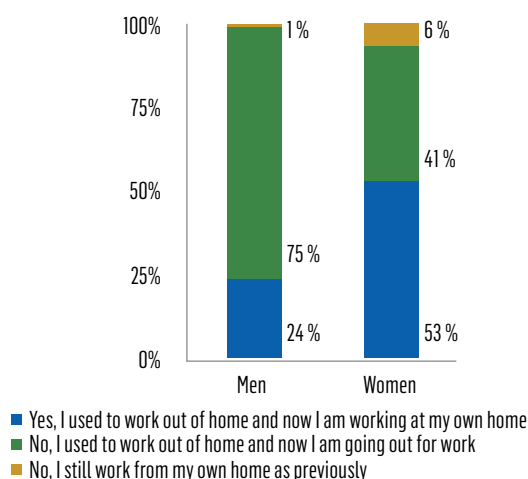


Figure 11: Proportion of individuals living in households with children and reporting a change in their working arrangements, per sex



have altered. 38% of employed/self-employed individuals have shifted from outside to working from home, a situation more prevalent among women than men. The share of women working from home is almost twice that of men (51% for women vs. 27% for men), as seen in figure 12. This is primarily due to women’s employment in the education and public sectors. The proportion of men declaring to experience changes in working arrangements to work from home is reported to be at 26.7%. Thus, while workplace flexibility helped provide care due to the closure of schools and childcare facilities, the burden of taking more household and care responsibilities during the pandemic is not distributed evenly. The COVID-19

crisis confirms the need for fairer distribution of unpaid work in the household among mothers and fathers, supported by accessible and affordable childcare services.

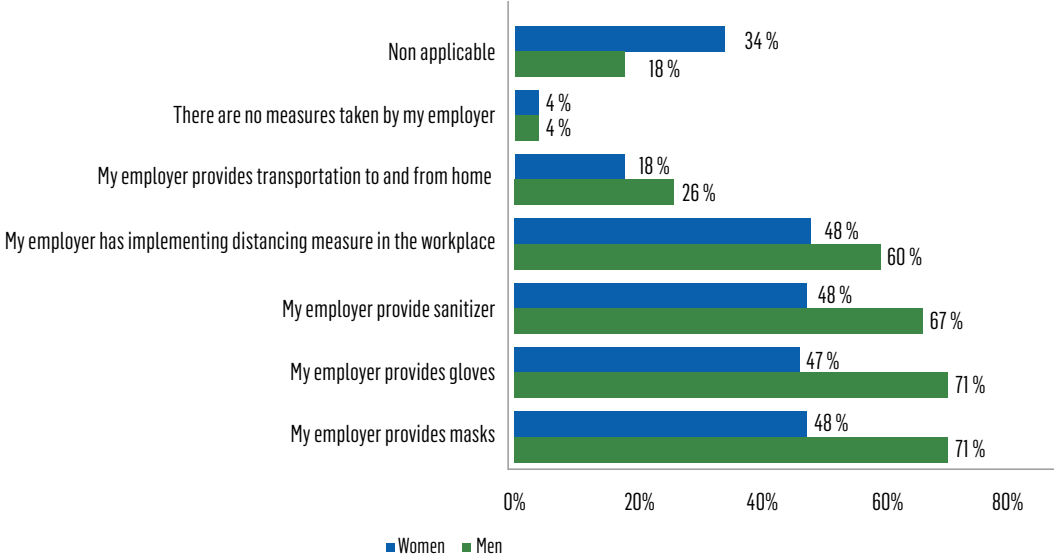
The proportion of women that changed their work arrangements due to COVID-19 is almost double compared to men. 51% of women who used to work out of home before the pandemic switched to smart working from home with the outbreak of COVID-19.

Employed individuals were asked to report their expectations on the impact of losing their jobs due to the pandemic and its related response.

Table 12: Expected Impact of COVID-19 on employment and income (N=446)

Category of Answers	Overall	Men	Women
I would likely continue to get paid full salary	35.00%	34.70%	35.30%
I would likely continue to get paid partially salary	22.40%	22.70%	22.20%
I would likely expect not to get paid	21.50%	22.70%	20.40%
I do not know	21.10%	20.00%	22.20%

Figure 12: Prevention measures provided by employers during COVID-19 pandemic situation (N=446)



They were asked to hypothetically consider not being able to work at all for at least two weeks, and under this hypothetical condition report the impact on their expected income. The share of people feeling uncertain on what might happen to their expected income if they lose their job due to COVID-19 represents 21.1% of the surveyed population. The share of those who expect nothing to change and that their income flow will remain unaffected equates to 35% of the employed surveyed population. 21.5% of employed individuals expect not to be paid at all, while 22.4% of respondents expected to get partial payments. The expectations seem to have similar patterns among women and men. Women working in the active processing industry and in the service sector reported to have higher uncertainty in losing their income if they do not work for two weeks. Regional patterns of responses were analyzed to identify areas with higher risks of facing negative impacts on livelihood due to

the pandemic. Women and men are expected to face risky situations due to the structure and performance of the economy at regional level being different. The higher proportion of those expecting to lose income and employment due to COVID-19 is reported in the regions of Tirana, Durres, Elbasan and Fier.

Individuals who reported themselves under the employed category and had not lost their job due to COVID-19 were asked to report on the protection and prevention measures that were supported by their employer. 60% of the respondents reported that their employer provided masks, gloves, and sanitizers. Employers have been careful to comply with social distancing, and again men reported a higher rate of employers ensuring that social distancing measures are respected than women do. The survey provides no evidence on why men seem to work in safer and more protected environments.

Table 13: Proportion of formal/informal businesses surveyed (N=167)

Is your business formally registered?	Overall	Men	Women
Yes	69.90%	67.00%	74.50%
No	29.40%	33.00%	23.60%
Don't know	0.70%	0.00%	1.80%
I do not know	21.10%	20.00%	22.20%

Table 14: Impact of COVID-19 on businesses (N=167)

How is your business affected after the spread of Coronavirus?	Overall	Men	Women
No change	5.70%	4.00%	8.30%
Increased/oversized	2.40%	1.30%	4.20%
Decreased/downsized	43.90%	46.70%	39.60%
Stopped totally	48.00%	48.00%	47.90%

Impact of COVID-19 on businesses

It is crucial to understand the impact of COVID-19 on businesses as a way to understand the social impact, business cycle, and the expectations for recovery. In order to explore this important aspect of COVID-19, self-employed individuals were identified – those who are self-employed and manage a business (either a business with employees or a family business). There are overall 167 respondents who reported on the impact of COVID-19 from a business perspective. Among those, 69.9% are formally registered enterprises, and roughly 29% are informal (subsistence/family small businesses). This share of informal businesses follows the national trend of informality, which is estimated to be roughly 30% of the total national economic activity (IC, 2018). The prevalence of women entrepreneurs managing formalized businesses is reported to be approximately 10 percentage points higher than men (see table 13).

A small share of companies (5.7%) reported no changes in their activity due to COVID-19, whereas a smaller proportion of companies (2.4%) declared that their business actually improved. The proportion of businesses experiencing improved odds or at least no negative impact is reported higher among women entrepreneurs. Businesses

that have retained their status-quo, reporting no impact or improvement, are mainly within the agriculture, commerce and transportation sectors.

Nevertheless, a large proportion of businesses reported to have been negatively impacted, mainly as a result of the lockdown situation. The proportion of companies that experienced downsizing of their economic activity is reported to be 43.9% of all companies and another 48% of surveyed business representatives reported a total shut down of the activities. There is a lower proportion of women entrepreneurs reporting a decrease of economic activity in their businesses, though the shutdown phenomena among businesses has affected women entrepreneurs similar to men entrepreneurs (see table 14).

Impact of COVID-19 on household income generating resources

Individuals, independent of their status regarding employment, were asked to identify if and how COVID-19 had impacted their income/earnings. The number of individuals who reported experiencing positive impacts on income generating resources were compared to those reporting negative impacts. The decrease in income generated from labor, business activity and investments are reported to

be 26%, 21% and 20% respectively. The proportion of individuals facing a negative impact on income received from farming is 12%, while the proportion of individuals suffering a decrease of food from their own farming (subsistence farming) is reported to be 17% of the population surveyed. Under this situation, pension income or social transfers has increased for 7% of individuals surveyed. Income as support from family/friends has been reported to increase for 2% of the population surveyed (see Figure 13).

For not being bias of the impact of the COVID-19 pandemic situation on income generating resources, it was re-estimated by using only for those individuals that report to use any of these resources to generate income.

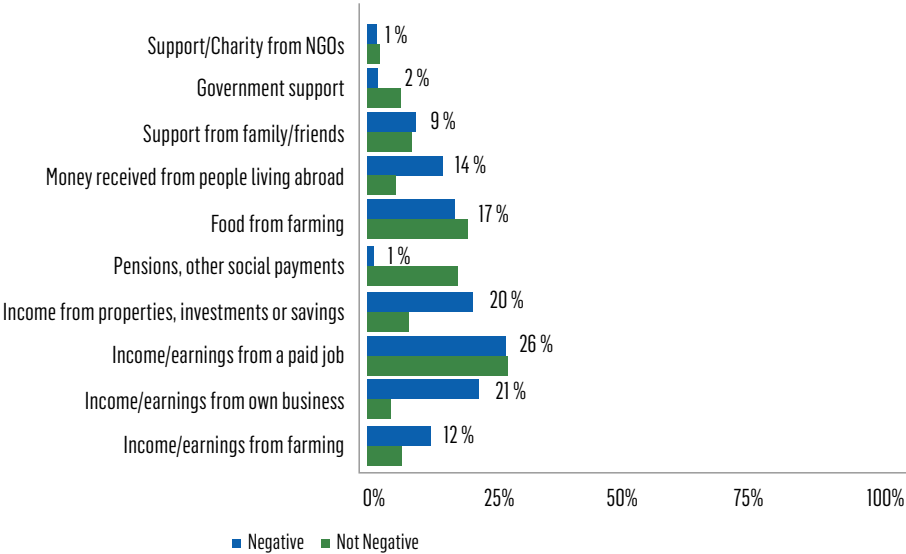
COVID-19 has negatively impacted income/earnings from owning a business given that 83% of women and 86% of men receiving earnings from owning a business reported difficulties in maintaining the same level of income as in a pre-COVID-19 situation (see figure 14). The second largest share of individuals who reported a decline in income are those having investments, properties to rent or savings. 73% of those individuals have reported that they are experiencing a decrease

of income from their properties or investments. Farming and remittances are also a source of income in decline due to COVID-19, as 63% of women and 67% of men are facing decreased income from farming activities, and 74% of women and 72% of men have responded that income from family members abroad have decreased during the ongoing pandemic situation.

The decrease in income from labour is also noticeable as 50% of working individuals are suffering a decrease of income from labor. This fully complies with the share of individuals who reported to have lost their job, set at work part time or given annual paid leave.

RGA data shows that both women and men experienced changes in the availability of personal income resources. So far, there is no difference in income from paid jobs for women and men, and on average, every second person reported a decrease of earnings from employment. The biggest decreases were registered in income generated from farming, family business and remittances. The loss from these specific sources sum up to 74% for women relying on income from remittances and 73% for those having personal savings and income generated from investments (figure 14). On the other hand,

Figure 13: Impact of COVID-19 on resources used to generate income for households (N=1300)



women appear to benefit relatively more from an increase in personal income resources, such as social transfers, in-kind support from government and family, and relatives. The only source of income that is reported as not being negatively affected by COVID-19 are social transfers, such as pension or other social payments, government support or in-kind support from charity. A higher share of women compared to men reported receiving an increase social payment or help from their friends and family (Figure 14).

Economic and Social Response Measures to COVID 19 Impact

The negative impact of COVID-19 lockdown measures to business activity as well as the extra costs of providing a safe working environment have all made business survival very difficult, causing uncertainties and unemployment. The Albanian government initiated a plan of social and economic support to those who faced challenges in regards to the survival of their families, children and businesses. The proportion of individuals who reported to have received or expected to receive any financial support from the government to cope

with the unexpected impacts of COVID-19 stood at 29.9% of the total surveyed population. 64.2% of respondents have not received or do not expect to receive any financial support by the government. Around 6.6% of individuals report not to be clear if they will receive any support in the future.

The expectation for financial support is similarly distributed among men and women. The expectation to receive financial support is reported higher among Roma/Egyptian women, women heads of household, and women with no or primary education. Overall sample businesses rather than employed individuals report to have higher expectations on being supported by government programs. Regionally, women in the Durres district, Korca and Kukës regions have reported higher than the overall expectations to be receiving government support.

Most citizens claim to be eligible for financial support as compensation for loss of income from paid work, with 21% of men and 23% of women interviewed having claimed wage compensation. Only 2.4 % of respondents declare to be eligible for receiving loans with sovereign guarantee with low interest rates mainly to meet the demand for business liquidity to cover fixed costs.

Figure 14: Proportion of respondents reporting a decrease of their income due to COVID-19, per income source and sex

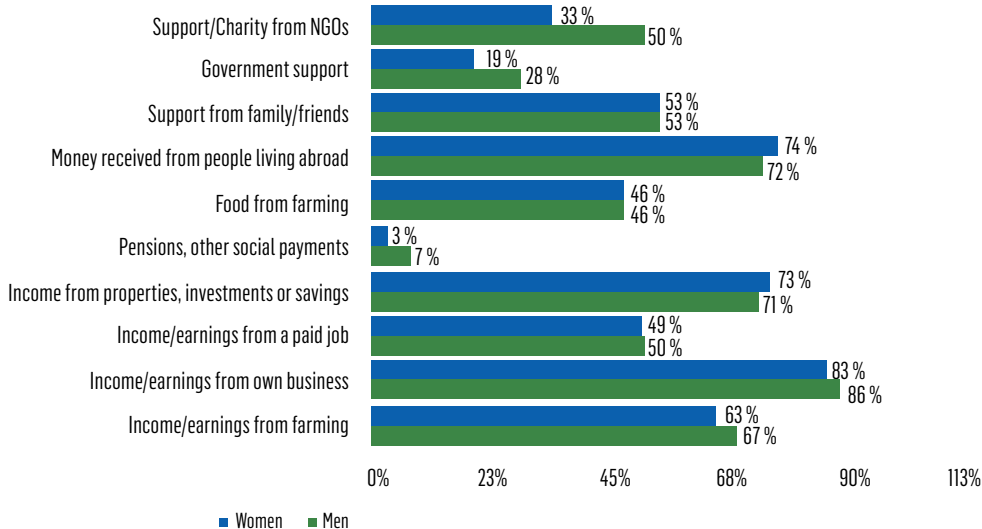
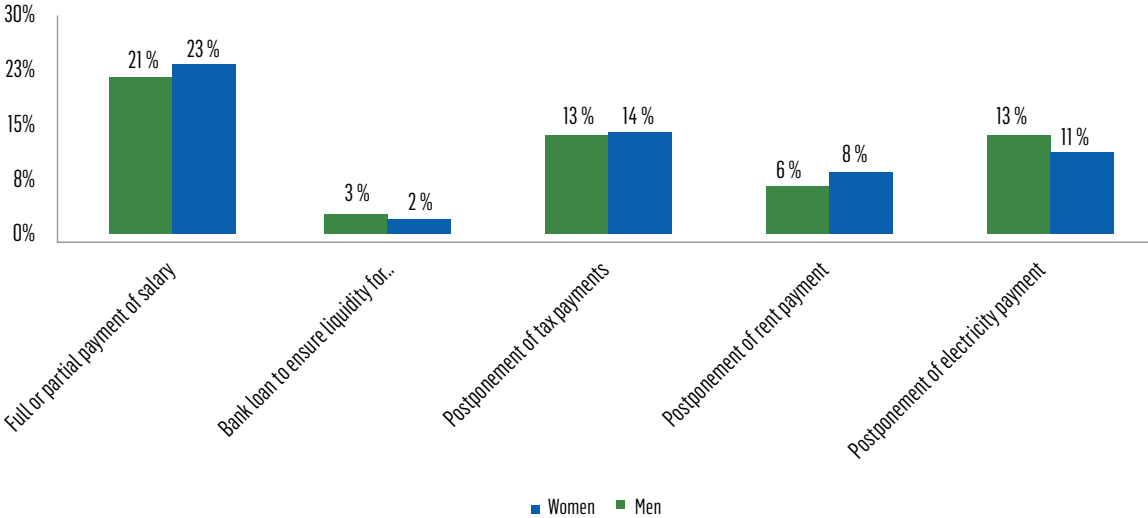


Table 15: Proportion of individuals reporting to have received or expecting to receive support from government during COVID-19, (N=1300)

Answer's category	Overall	Men	Women
Yes	29.2%	27.4%	30.9%
No	64.2%	66.1%	62.4%
Don't know	6.6%	6.5%	6.7%

Figure 15: Proportion of individuals reporting eligibility to government support program (N=1300)



Postponement of tax payments were claimed by 13.4% of respondents, a claim that appears similar for the postponement of energy payment (12%). Roughly 7% of respondents are demanding support to cover rent, and higher share of rent payment claims are found for women if compared to men and particularly for students (23% of students claim rent support) and businesses (13% and 12% of family businesses claim support for rent payment). Businesses claim support mostly for staff salary payment, tax payments to be postponed and rent payments. Vulnerable groups claim mainly postponements of tax and electricity payments.

The proportion of individuals who declared to have received in-kind support from public authorities (central and local government) is very low, with only 7% of respondents having declared to have received some form of in-kind support. 5% of individuals have received food supplies, only 1% received hygiene and cleaning products, and another 1% of respondents received PPEs (gloves, masks, sanitizers,

etc). The proportion of individuals receiving support from NGOs/CSOs is also very low. Overall, 1.6% of respondents have declared to receive in-kind support by a non-governmental organization, including food, prevention supplies, and items for personal hygiene. Women have reported a slightly higher number of receiving in-kind from government authorities.

Impact of COVID-19 on Distribution of Household Chores and Roles

The closure of schools and the existence of elderly care that tends to demand more of women's time at the household level, has consequently increased the likelihood of women's burden of unpaid domestic and care work, alongside a decrease in income and paid work hours. The proportion of individuals – mostly women – reporting to have experienced increased cooking time during lockdown is 29.8%.

Table 16: Proportion of individuals reporting to have received in-kind support from the Government or non-government (N=1300)

In-kind support from the Government	Overall	Men	Women
Yes, food	5.0%	4.6%	5.5%
Yes, supplies for prevention (gloves, masks, sanitizer, etc.)	1.1%	1.4%	0.8%
Yes, personal hygiene supplies (menstrual supplies, baby diapers)	0.5%	0.8%	0.3%
No	93.2%	93.1%	93.2%
I don't know	0.2%	0.2%	0.3%
In-kind support from Non-Governmental/civil society	Overall	Men	Women
Yes, food	1.0%	1.1%	0.9%
Yes, supplies for prevention (gloves, masks, sanitizer, etc.)	0.4%	0.5%	0.3%
Yes, personal hygiene supplies (menstrual supplies, baby diapers)	0.2%	0.5%	0.0%
No	98.2%	97.5%	98.5%
I don't know	0.4%	0.5%	0.3%

Another 53.8% of respondents, again mostly women, declared to have increased cleaning time. Among other chores reported to take more time than before COVID-19 are spending time with children which increased for 30.6% of surveyed individuals, helping or caring about old/sick or disabled people which increased for 54.8% of individuals, time to teach kids which increased for 27% of surveyed individuals, and time spent to take care of pets which increased for 29.8% of respondents. Shopping time also seems to have increased, as reported by 22.1% of respondents.

The role and distribution of household chores is particularly affected by a gendered perspective, with women performing most repetitive tasks such as cooking and cleaning, given tradition and cultural factors affecting the distribution of jobs at the household level.

The coronavirus containment measures have significantly increased unpaid domestic and care work for both men and women. However, the burden of “invisible work” carried out by women is more apparent. While both women and men have increased their share of household chores and care work, women are more likely to continue to perform the bulk of these tasks. Data from the survey shows that 76% of women reported an

increase in providing unpaid domestic work, and 72% of women reported that they experienced an increase in unpaid care work. Notably, the share of men with increased time on unpaid domestic work and care work is also rather high, at 66% and 62% respectively.

Women have been contributing to cleaning, cooking and taking care of children, elderly or disabled individuals. It is particularly for those activities that women report an increase in time spent to perform. Time spent for cooking increased for 41% of women, while time spent for cleaning increased for 66%, time spent to play, teach, or care for children, increased for 35% of women. A high proportion of women also reported to experience an increase in time spent on emotional support of their adult family members (see table 18).

Men respondents also contributed more to cleaning chores at home (41.6%). Survey data show that men engaged more with their children, including playing with and teaching them. The proportion of men reporting an increase in time spent caring for children is 34.9%. Men respondents also reported an increase in time spent on shopping (30.5% of men report increase of time for shopping), engaging in household management (19.9%

Table 17: Impact of COVID-19 on the number of hours devoted to the following household activities (N=1300)

	I do not usually do it	Increased	Unchanged	Decreased	Non applicable
Cooking and serving meals	13.8%	29.8%	37.2%	13.2%	5.9%
Cleaning and maintaining own dwelling and surroundings (e.g. clothes, household)	9.9%	53.8%	29.8%	1.9%	4.6%
Household management (e.g. paying bills)	9.8%	19.1%	62.5%	5.5%	3%
Shopping for my family/household member	9.5%	28.4%	38.2%	22.1%	1.8%
Collecting water/ firewood/fuel	7.8%	15.8%	63.2%	7.8%	5.4%
Playing with, talking to and reading to children	2.5%	30.6%	12.%	2.4%	52.5%
Instructing, teaching, training children	3%	27%	12%	1%	57%
Caring for children, including feeding, cleaning, physical care	1.7%	15.6%	19.5%	0.8%	62.4%
Assisting older/sick/disabled adults with medical care, feeding, cleaning, physical care	1.1%	54.8%	32.6%	2.2%	9.4%
Affective/emotional support for adult family members	1.5%	11.3%	18.3%	1.2%	67.7%
Pet care	13.8%	29.8%	37.2%	13.2%	5.9%

report increase), and providing emotional support to adult family members (see table 18).

Women have been taking on more household chores and care work, with every second woman having reported an increase in performing at least two activities related to unpaid domestic work. Men and women were asked to report increased time spent on unpaid work or unpaid care activities. Respondents selected their answer from a list of five unpaid work activities and five unpaid care activities. An indicator variable was constructed, counting the respondents who declared increased time spent on at least one, two, or three unpaid work or care activities. This indicator helps to shed light on the distribution of roles and burden at the household level among its members. The gender discrepancies become more evident in performing more than one activity of unpaid domestic and care work. The share of men performing at least two unpaid domestic work activities decreased significantly and only a third are performing two activities compared with every second woman.

The increase of time spent on unpaid domestic work is higher among households with children; however, the gender differences remain similar. A different pattern is observed for time spent on unpaid care activities, which includes taking care of children, elderly or persons with health disabilities at home. Increase of time spent on unpaid care activities for households with children is almost double that of households without children. The same pattern was observed for households with elderly, being that single-headed household or married/cohabitating partners living with children or elderly.

Since the spread of the COVID-19, men reported to have spent most of their time in cleaning activities (24.6%), shopping for their families (25.5%), house management (9.1%), and engaging with their children including playing, instructing or caring for them (around 14%). Women on the other hand, spent most of their time cleaning (51.7%), cooking (19.6%), caring for children and helping them with studies (17.2%). Men report a high prevalence of engaging in care for elderly or sick members of

Table 18: Impact of COVID-19 on the number of hours devoted to household chores and duties, per gender

	I do not usually do it	Increased	Unchanged	Decreased	Non applicable
Women					
Cooking and serving meals	3.1%	41%	40.7%	14.7%	0.6%
Cleaning and maintaining own dwelling and surroundings (e.g. clothes household)	0.9%	65.7%	31.5%	1.5%	0.3%
Household management (e.g. paying bills)	12.8%	19.9%	60.1%	5.8%	1.4%
Shopping for my family/household member	11.8%	26.3%	37.9%	21.9%	2.1%
Collecting water/ firewood/fuel	11.1%	16.7%	59.6%	7.6%	5%
Playing with, talking to and reading to children	2.1%	34.9%	11.8%	2.1%	49.1%
Caring for children, including feeding, cleaning, physical care	2%	32%	12%	1%	54%
Assisting older/sick/disabled adults with medical care, feeding,	1.8%	15.9%	17.6%	0.8%	63.9%
Affective/emotional support for adult family members	1.1%	59.2%	30%	1.2%	8.6%
Pet care	1.8%	10.2%	16.2%	1.1%	70.6%
Men					
Cooking and serving meals	24.8%	18.6%	33.7%	11.6%	11.3%
Cleaning and maintaining own dwelling and surroundings (e.g. clothes household)	19%	41.6%	28%	2.3%	9%
Household management (e.g. paying bills)	6.8%	18.3%	65%	5.3%	4.6%
Shopping for my family/household member	7.1%	30.5%	38.5%	22.3%	1.5%
Collecting water/ firewood/fuel	4.5%	15%	66.9%	7.9%	5.7%
Playing with, talking to and reading to children	2.8%	26.3%	12.2%	2.6%	56%
Caring for children, including feeding, cleaning, physical care	4%	21%	12%	2%	6%
Assisting older/sick/disabled adults with medical care, feeding,	1.5%	15.3%	21.4%	0.9%	60.8%
Affective/emotional support for adult family members	1.1%	50.3%	35.3%	3.1%	10.2%
Pet care	1.2%	12.4%	20.4%	1.2%	64.7%

Figure 16: Proportion of people whose time on unpaid domestic work increased since the spread of COVID-19

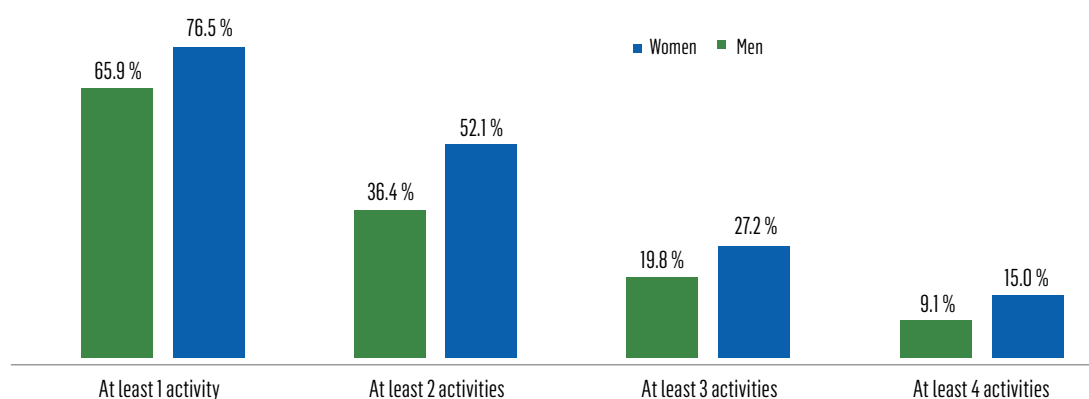


Figure 17: Proportion of people whose time spent on unpaid domestic care activities increased since COVID-19

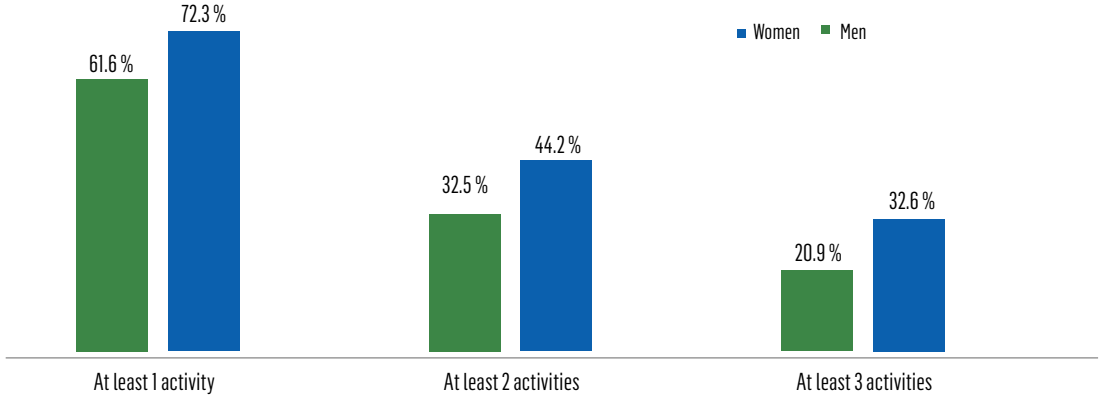


Figure 18: Proportion of men and women experiencing increase of time spent in unpaid housework

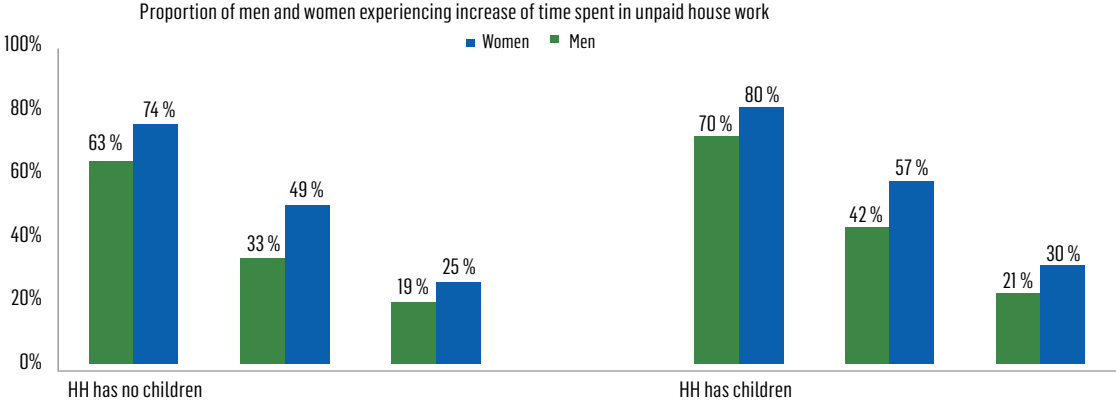
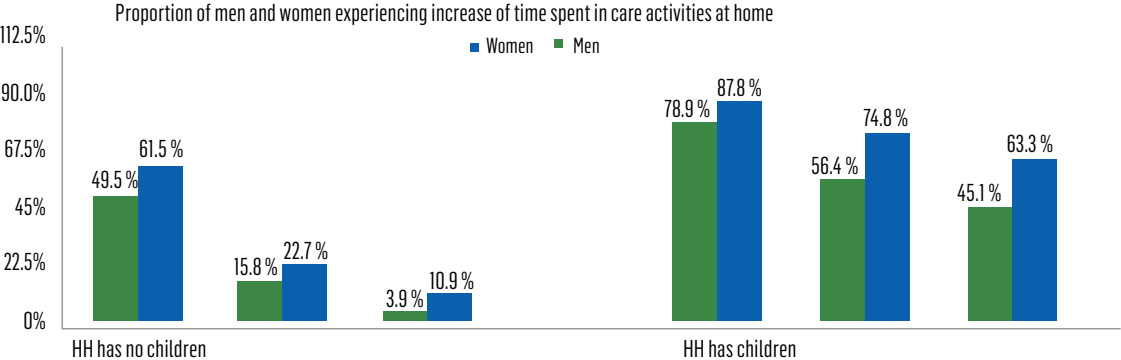


Figure 19: Proportion of men and women experiencing increase of time spent in care activities at home



their families if compared to women. The top three activities for women are cleaning, cooking and serving meals, and caring for children, while the three top activities for men are shopping, cleaning, and maintaining/paying bills. Nevertheless, data suggests that engagement from both women and men in household activities takes place with clear division of labour by gender.

Individuals were asked to report if since the spread of COVID-19, the role and engagement of household members within the household has been affected. Generally, the role and engagement of household members seem to have been affected by the pandemic situation. More than half of surveyed individuals report they received help from family members, mainly from their

Figure 20: Proportion of respondents receiving support on household chores during COVID-19, by sex

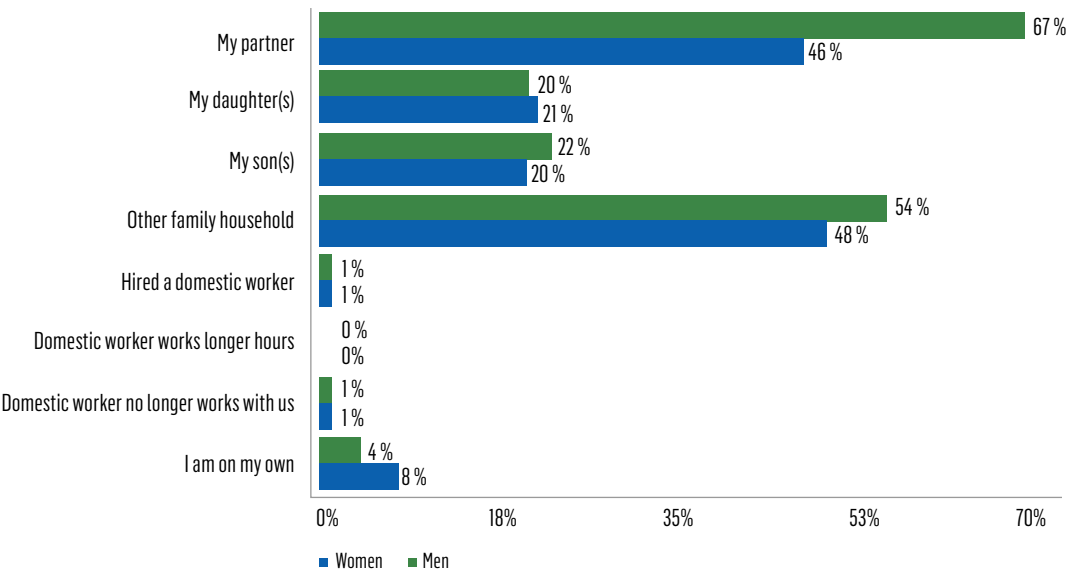


Table 19: Time allocation per different household duties or chores, per gender

Domestic work/ Domestic Care category	Household Activity	Men	Women
Unpaid Domestic Work	Cooking and serving meals	5.90%	19.6%
	Cleaning and maintaining own dwelling and surroundings (e.g. clothes, household)	24.6%	51.7%
	Household management (e.g. paying bills)	9.1%	1.8%
	Shopping for my family/household member	25.5%	2.3%
	Collecting water// firewood /fuel	2.6%	0%
Unpaid Domestic Care	Playing with, talking to and reading to children	6.3%	2.6%
	Instructing, teaching, training children	3.9%	6.3%
	Caring for children, including feeding, cleaning, physical care	3.7%	8.3%
	Assisting older/sick/disabled adults with medical care, feeding, cleaning, physical care	3.3%	2%
	Affective/emotional support for adult family members	7.9%	4%

partners (wife or husband). Other members of the family are also helping, as 50.8% of respondents report to have received help from other family members. Daughters and sons are helping in only 20% of families, while hired house care workers or babysitting support has not been used. Only 5.7% of individuals report they are on their own dealing with household chores and receive no help.

Impact of COVID-19 on Health and Wellbeing

RGA survey data shows that the COVID-19 pandemic has had a strong impact on individuals’ health, especially on psychological and mental health. Overall, 63% of individuals responded that their psychological/mental health was negatively

affected. The prevalence of women experiencing difficulties in their psychological/mental/emotional health is significantly higher than men (69% vs. 57%) (Figure 21). Notably, women in the active working age group, 35-44 years, are experiencing even higher psychological distress at a prevalence of 72% compared to 58% among men in the same age group. The most probable reason behind this result may be the increased burden of unpaid care work for women compounded with potential loss of jobs and related financial distress caused as a result of the uncertainty of the pandemic.

This pattern is similar for urban and rural respondents, with the exception of elderly women in rural areas. The proportion of women aged 65+ years in rural areas experiencing emotional distress are among the highest (77% vs. 50% for women in urban areas) (Figure 25). This is mainly due to elderly women in rural areas living alone with their adult children in migration. The fear of facing health problems in solitude, the concerns over their children’s health and the difficulty to understand the current situation is causing more emotional problems among elderly women.

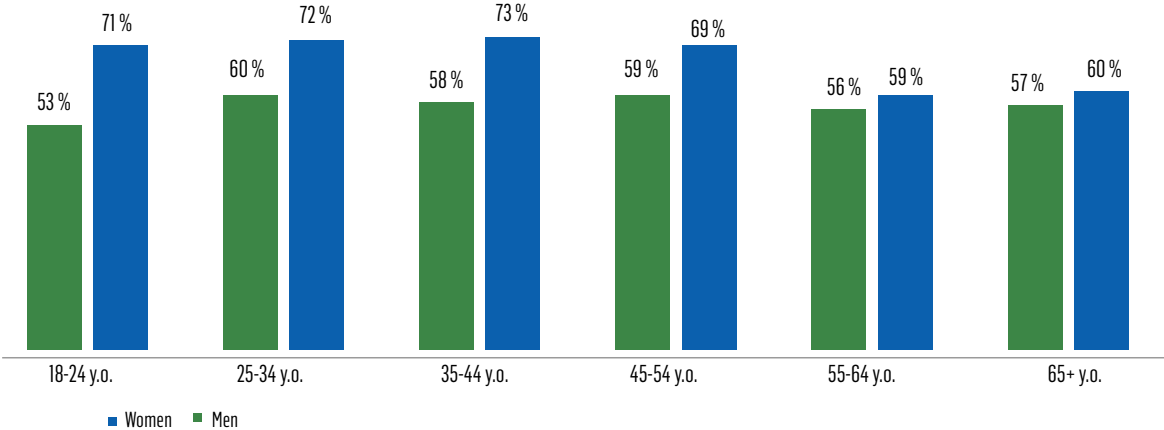
Around 10.4% of men reported that due to COVID-19 they decided to move/migrate in other areas of Albania. This is lower among women, of which only 5.4% reported having had to migrate/move due to COVID-19. Other difficulties

that individuals reported experiencing due to the pandemic were physical illness (4.8% of respondents), illness of a family member (4.2% of respondents), or death of a family member (1% of the respondents) – which consequently adds to psychological and mental health issues.

Nine percent of respondents reported experiencing an increased form of discrimination or prejudice during the pandemic, and this prevalence is higher among men than women. Overall, 86% of the population reported that they felt a manifestation of compassion and solidarity during COVID-19, rather than feelings of discrimination and hatred.

Another 4.9% of respondents declare to have felt/heard an increase of domestic violence. They reported mainly having “heard the neighbors” shouting or fighting, rather than personally experiencing domestic violence. This contradicts the large number of individuals that confirmed to have experienced psychological/emotional problems, confirming the fact that domestic violence has always been hidden. The prevalence of women reporting to have felt/heard of increases in domestic violence is higher than men. Most respondents declared that they know where to report situations of domestic violence, with 66.3% of individuals (particularly 66.7% of women) knowing where to report such cases. However, 26% of women are not aware of how and where domestic violence case could be

Figure 21: Proportion of respondents reporting to experience psychological and mental health problems due to COVID-19, per age group and gender (N=1300)



reported – which could increase the prevalence of domestic violence against them. The proportion of individuals experiencing or witnessing domestic violence is higher among those experiencing psychological or mental health problems. Women who reported having ‘felt/heard an increase in domestic violence’ also reported a higher impact of the pandemic on their psychological and mental health if compared to men, in both urban and rural areas. In rural areas, the manifestation is much higher among women, by 21 percent points.

Impact of COVID-19 on access to basic services

Accessing basic services such as health services during the pandemic was compromised to a certain extent due to rapid increases in demand and a rapid decline in service availability. A major difficulty faced by individuals during the COVID-19 lockdown period has been related to the lack of public transportation (29.5%). A share of 14.7% of respondents reported facing major

Figure 22: Proportion of respondents reporting psychological and mental health problem/s due to COVID-19 per location, age and sex (N=1300)

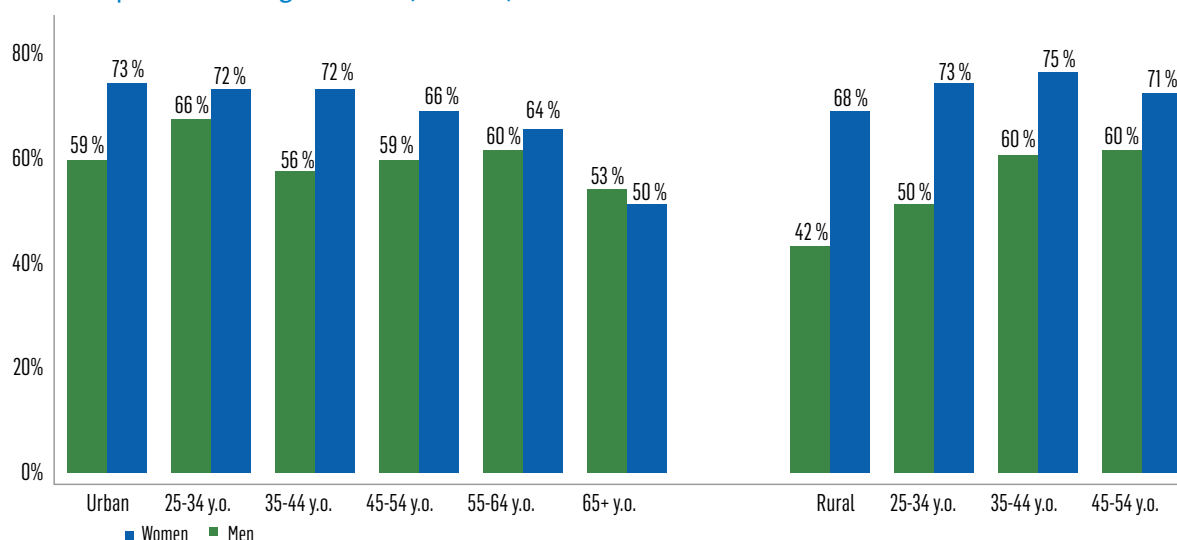


Table 20: Impact of COVID-19 on domestic violence, by gender

		Overall	Men	Women
Have you felt increase of any form of discrimination, prejudice	Yes	9.00%	9.80%	8.30%
	No	86.10%	86.20%	85.90%
	Refuse to answer	0.70%	0.60%	0.80%
	I do not know	4.20%	3.40%	5.00%
Have you felt/heard about increases in domestic violence	Yes	4.90%	4.30%	5.50%
	No	90.80%	90.90%	90.70%
	Refuse to answer	0.20%	0.00%	0.50%
	I do not know	4.10%	4.80%	3.40%
Do you know where to seek help and support in case of domestic violence	Yes	66.30%	65.90%	66.70%
	No	28.10%	30.20%	26.00%
	Refuse to answer	0.80%	0.50%	1.10%
	I do not know	4.80%	3.40%	6.30%

Figure 23: Proportion of respondents reporting to have felt/heard domestic violence and experienced psychological/health problems, by location and sex



risks in not being able to be supplied with food items, where the proportion of women facing major difficulty to be supplied with food items is higher than men by 3.2 percentage points (see table 21). Major difficulties in accessing basic services/supplies were also reported for personal protection items such as mask, sanitizers etc., given that 22.8% of the respondent declare they faced major difficulties in being supplied with such items. Accessing social assistance services (social protection) was a major difficulty for 17.8% of respondents while accessing health services was a major difficulty for 10.7% of respondents. Overall, women faced major difficulties at a higher rate in accessing these services compared to men, except for public transportation for which men and women reported the same level of difficulty. More frequently than men, women experienced limited access to basic health services. Almost every fifth respondent mentioned major or some difficulties in seeking health services, and both women and men faced difficulties to find the necessary medical supplies for personal protection against COVID-19. Nevertheless, women more frequently reported challenges in buying medical supplies (51% compared to 43% men). This difficulty was reported at higher levels among women in urban areas compared to men (11 percent points higher). In rural areas, 49% of women reported to face major/some challenges in accessing medical supplies, while 25% reported to have faced challenges in accessing medical services. In rural areas, the percentage of women reporting these challenges in access was 10 points higher than men (Figure 24).

Among age groups, younger women aged 18-24 years reported a higher rate of facing major/some difficulty in accessing health services and medical supplies. In addition, the assessment revealed that access to essential sexual and reproductive health services (SRHS) became more difficult during travel restrictions and lockdown as a result of COVID-19. Data shows that in Albania, about 5% of women experienced some difficulties in accessing gynecological and obstetric care services. Access to such services is key to prevent women’s sexual and reproductive health from worsening. The difficulties to access basic health services coupled with higher psychological and emotional stress may negatively affect women’s future health outcomes (see Table 22).

Future expectation and coping strategies with the impacts of COVID-19

The coronavirus crisis brought not only fear, emotional stress and loss of incomes, but also uncertainty and financial insecurity in sustaining basic daily needs in the near future. Overall, 71% of respondents reported concerns about their ability to cover basic expenses if the restrictive measures continued, and almost 74.2% indicated that they most probably will not be able to pay for rent and utilities. The economic insecurity will particularly impact women and women headed households, who will face difficulties in paying for rent (85%), while keeping up with basic expenses will be a real challenge for another 80%(Figure 25).

Table 21: Difficulties in accessing basic services/supplies due to COVID-19 (N=1300)

	Answers	Overall	Men	Women
Food products/supply	Major difficulties	14.7%	13.3%	16.1%
	Some difficulties	29.8%	29.3%	30.3%
	No difficulties	55.2%	57%	53.5%
	No need	0.3%	0.5%	0.2%
Medical supplies for personal protection	Major difficulties	22.8%	20.7%	24.8%
	Some difficulties	24.3%	22.3%	26.3%
	No difficulties	44.2%	47.2%	41.1%
	No need	8.8%	9.8%	7.8%
Health services	Major difficulties	10.7%	8.4%	13%
	Some difficulties	8.9%	7.6%	10.2%
	No difficulties	19.4%	19.5%	19.3%
	No need	61%	64.6%	57.50%
Hygiene and sanitary products	Major difficulties	6.3%	5.3%	7.30%
	Some difficulties	15.7%	14.4%	17%
	No difficulties	76.1%	78.5%	73.7%
	No need	1.9%	1.9%	2%
Public transport	Major difficulties	29.5%	31.1%	28%
	Some difficulties	5.5%	5%	6%
	No difficulties	8.2%	8.5%	8%
	No need	56.8%	55.4%	58.1%
Water supply	Major difficulties	3.5%	3.3%	3.8%
	Some difficulties	8%	9.1%	6.9%
	No difficulties	80.8%	79.6%	82%
	No need	7.7%	8%	7.3%
Social services/assistance	Major difficulties	17.8%	16.1%	19.4%
	Some difficulties	6.7%	7%	6.4%
	No difficulties	6.1%	5%	7.2%
	No need	69.5%	72%	67%

Figure 24: Proportion of respondents reporting major/some difficulties in accessing health services and medical supplies during COVID-19, by age and sex

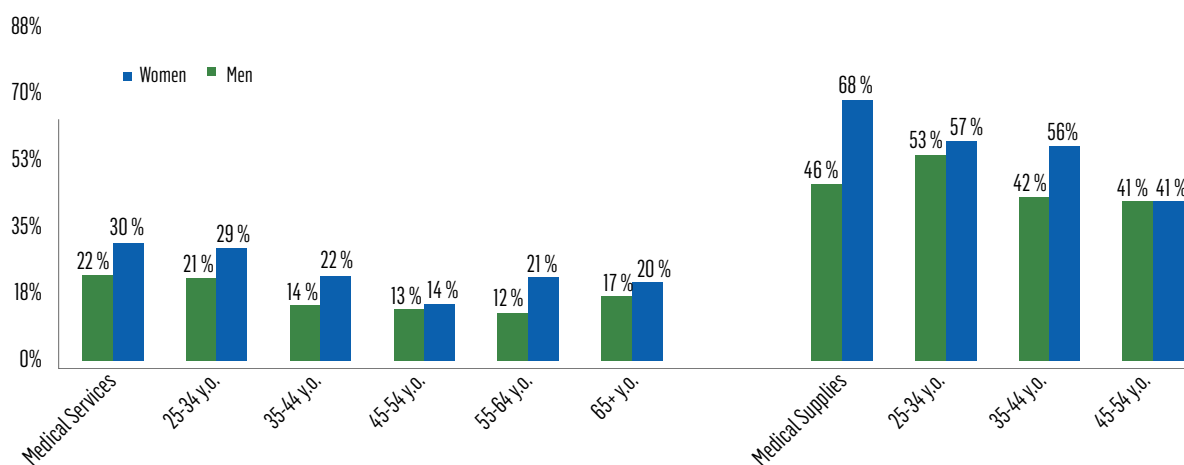


Table 22: Access to sexual and reproductive health services during COVID-19

	Category of Answers	Frequency (in %)
Gynecological and obstetric care services	No need for these products	89%
	Yes, but I did not face any difficulties	4.1%
	Yes, and I faced some difficulties	2.3%
	Yes, and I faced major difficulties	2.3%
	Refuse to answer	2.3%
Contraceptives	No need for these products	93%
	Yes, but I did not face any difficulties	2.3%
	Yes, and I faced some difficulties	0.5%
	Yes, and I faced major difficulties	0.2%
	Refuse to answer	4.1%

Figure 25. Proportion of population by expecting future difficulties due to COVID-19

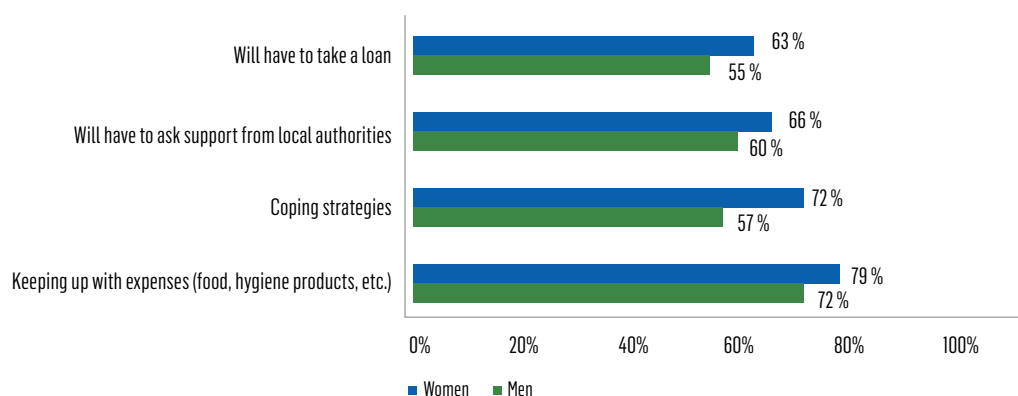


Table 23. If restrictive measures related to spread of COVID-19 continue, what would be most likely to happen to your household financial situation?

	Answers	Overall	Men	Women
Would be difficult to keep up with basic expenses (food, hygiene products, etc.)	Yes	71. %	70.1%	71.9%
	No	29. %	29.9%	28.1%
Would be difficult to pay for renting and utilities	Yes	74.7%	72.4%	76.9%
	No	25.3%	27.6%	23.1%
Will have to stop seeking health services/assistance	Yes	35.9%	35.1%	36.7%
	No	64.1%	64.9%	63.3%
Will have to ask help from relatives and friends	Yes	58.4%	56.2%	60.6%
	No	41.6%	43.8%	39.4%
Will have to ask help from the local authorities	Yes	58.1%	57.6%	58.6%
	No	41.9%	42.4%	41.4%
Will have to take a loan	Yes	52.5%	52.8%	52.3%
	No	47.5%	47.2%	47.7%

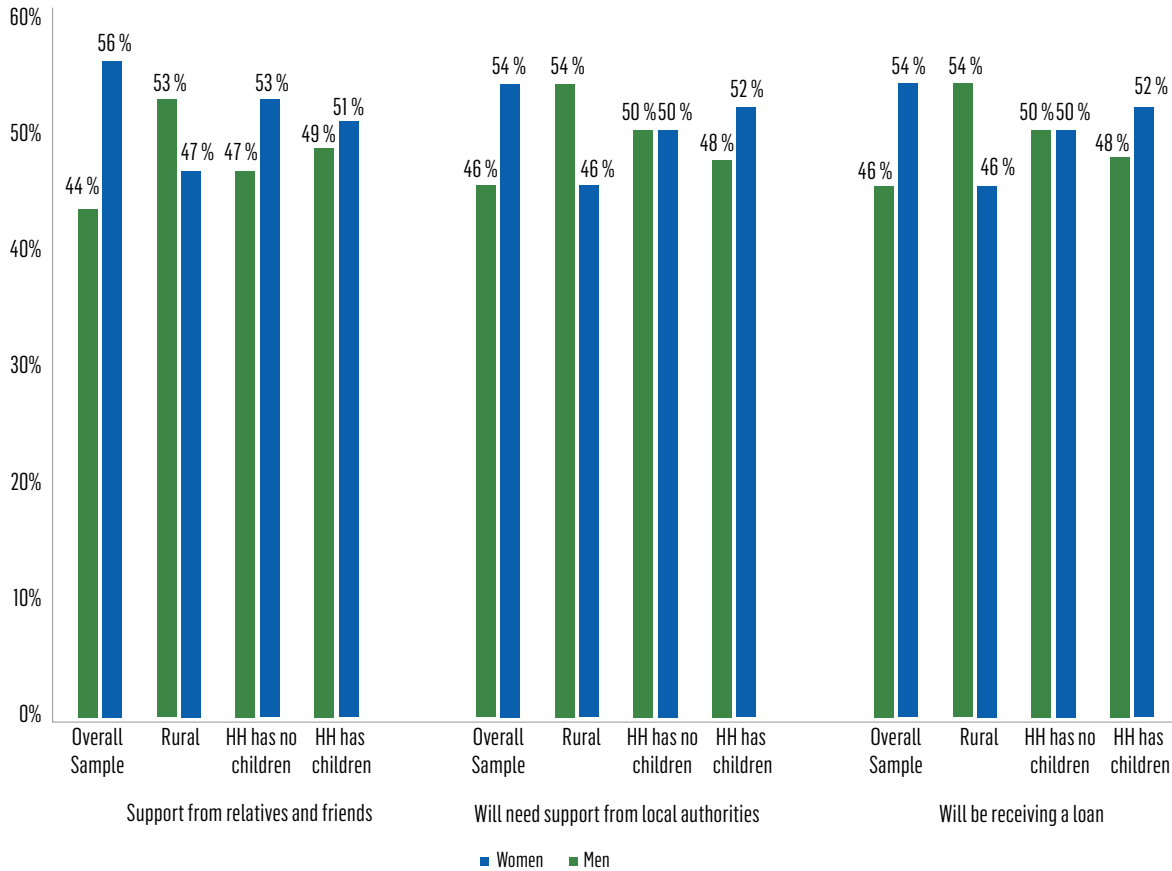
To respond to these challenges, women will rely mainly on support from relatives (72%) and/or local authorities (66%), while 63% are expected to take loans to recover the loss of income sources during the coronavirus pandemic.

Households with children are among the most vulnerable groups. In case restrictive measures related to COVID-19 last longer, 80% of respondents will face major difficulties in paying for rent and utilities, and 76% will most probably not be able to keep up with basic daily expenses, such as food and hygiene products. Women in urban areas and those living in households with children have higher odds of feeling more uncertain about their ability to afford the needs for their families if compared to men or women from other demographic groups. As a consequence, women in general and women from those two particular groups report a higher

need for support either by friends, the Government or financial institutions (Figure 26).

For many, support from authorities remains crucial to face the negative impact of COVID-19 on household welfare, especially in the near future. Uncertainties and fear for the future is high in the population. The proportion of individuals that expect to receive any benefit/financial support through government programs amount to 29.9% of the population. The expectation to receive support from any government program is similarly distributed among women and men in general, however among respondents the proportion of women receiving/or expecting to receive support is higher compared to men among Roma/Egyptian women (50%), rural women (38%) as well as women being unemployed (31%) (see, Figure 26 and table 23).

Figure 26: Proportion of respondents reporting to need support to face impact of COVID-19, by location, household type and sex



CONCLUSION

The analysis presented in this report reveals that women and men in Albania are suffering from a multitude of problems due to COVID-19 and its related prevention measures, primarily related to an increase in vulnerabilities of both genders and with an even greater impact on women and girls in vulnerable domestic and economic situations.

For many Albanians, the support, especially immediate support, from authorities remains crucial to face the negative impact of COVID-19 on household welfare, especially in the short-term and in the near future. Uncertainties and fear for the future is reported high among the population, irrespective of gender, location, age-group or financial position. The proportion of individuals that expect to receive any benefit or financial support through government programs represents only 29.9% of the population. The expectation to receive support from any government program is the same for women and men in general; however, among respondents the proportion of women receiving/or expecting to receive support is higher compared to men.

Where restrictive measures have successfully managed to curb the impact of the virus on the health of the population, any post-COVID-19 strategies should address the increased fear and stress among people about their future prospects, their psychological suffering, as well as the need to continue and strictly follow preventive measures in a manner that is attainable. Furthermore, in order to reduce or eliminate the impact of COVID-19 and lockdown measures on the long-term health of individuals, particularly that of women, social and health care services need to develop and deliver targeted

support programs to families, and in particular, to women.

Unpaid domestic and care work at the household level have trajected upwards during the pandemic, with significant increases to the already disproportionate burden of women performing such chores. Measures should be taken that this burden is somehow mitigated for women over the long-term, particularly, if measures to prevent COVID-19 will persist. Children will continue to follow homeschooling, men partners will be back at work, women's share of unpaid work at home will remain burdensome. Childcare services and support could be designed and implemented during the summertime, alleviating the burden to women and allow their productive participation in the labor market.

Many individuals experienced a decrease in generating income from investments, work, and business. The recovery toward pre-COVID-19 income levels will take time, given that many economies are down on a recessive path. The share of women losing even the subsistence income from farming or remittances is also reported highly. Therefore, *social transfers and other support measures are crucial to the recovery of the economy. Given that the negative impact*

of the pandemic has been stronger on vulnerable groups, including women and girls, the support measures need to be tailored and adjusted to the different needs of differing vulnerable groups.

Unemployment is expected to surge with the recessive conditions of the economy, with businesses cutting costs to cover the losses experienced during the lock-down measures, contracting consumption due to fear and uncertainties of future work and income. The most vulnerable groups to have lost their jobs and face unemployment are women aged 25-44 years and younger populations in urban areas such as Tirana or Durres. *Employment services and workers associations need to be engaged more actively in protecting employees from losing their jobs, demanding training or mediation programs to help people re-enter into the labor*

market or shifting to new forms of jobs or working arrangements (online), and not fall into long-term unemployment.

Impact on businesses is reported to be immense as the government has acknowledged these potential negative repercussions of the contracted business activities. *Some of that support needs to address difficulties that women and young entrepreneurs face, as they run activities in the low end of profitability while having a large impact on the local economy.* Sectors suffering the most negative impacts, such as tourism and the service sectors, are important to the economic recovery program. However, attention and support might be needed to family operated and small farming or tourism activities, which seems to lack a potential to finance adjustment of their activities to the new conditions of COVID-19.



Social transfers and other support measures are crucial to the recovery of the economy. Given that the negative impact of the pandemic has been stronger on vulnerable groups, including women and girls, the support measures need to be tailored and adjusted to the different needs of differing vulnerable groups.



Employment services and workers associations need to be engaged more actively in protecting employees from losing their jobs, demanding training or mediation programs to help people re-enter into the labor market or shifting to new forms of jobs or working arrangements (online), and not fall into long-term unemployment.



Some of that support needs to address difficulties that women and young entrepreneurs face, as they run activities in the low end of profitability while having a large impact on the local economy.

APPENDICES

Appendix 1

Sampling strata and distribution properties per region and urban/rural

	Regional Quotas	Distribution of Sample per urban/rural areas			
	Total	Urban (57%)	Rural (43%)	Urban	Rural
Berat	56	49.4%	50.6%	28	28
Diber	53	28.3%	71.7%	15	38
Durres	133	77.2%	22.8%	103	30
Elbasan	124	42.7%	57.3%	53	71
Fier	132	43.6%	56.4%	58	74
Gjirokaster	27	56.3%	43.7%	15	12
Korce	93	44.2%	55.8%	41	52
Kukes	35	36.5%	63.5%	13	22
Lezhe	56	56.7%	43.3%	32	24
Shkoder	91	48.7%	51.3%	44	47
Tirane	414	73.4%	26.6%	304	110
Vlore	86	68.9%	31.1%	59	27
Total	1300			746	554

Appendix 2

Regional and Gender distribution of the Survey Sample

Regions	In (%)			In No.		
	Total	Men	Women	Total	Men	Women
Berat	4.3%	2.1%	2.1%	56	28	28
Diber	4.1%	2.1%	1.9%	53	28	25
Durres	10.2%	5.2%	5.0%	133	67	66
Elbasan	9.5%	4.7%	4.8%	124	62	62
Fier	10.2%	5.2%	5%	132	67	65
Gjirokaster	2.1%	1%	1.1%	27	13	14
Korce	7.2%	3.6%	3.6%	93	46	47
Kukes	2.7%	1.4%	1.3%	35	18	17
Lezhe	4.3%	2.1%	2.2%	56	28	28
Shkoder	7.0%	3.4%	3.6%	91	45	46
Tirane	31.8%	15.7%	16.1%	414	204	210
Vlore	6.6%	3.3%	3.3%	86	43	43
Total	100%	49.9%	50.1%	1300	649	651

Appendix 3

Sample age distribution

Age	Percentage	Interviews
18-24	13.6%	177
25-34	19.5%	254
35-44	14.9%	193
45-54	16.1%	209
55-64	17.3%	225
65+	18.7%	242
Total	100%	1300

Appendix 4

Sample Gender Distribution

Gender	Population Census (18+, in %)	Achieved sample size (in %)
Men	49.9%	49.7%
Women	50.1%	50.3%

Appendix 5

Sample age distribution vs. Population distribution

Age	Population Census (18+, in %)	Achieved sample size (in %)
18-24	13.6%	15.46%
25-34	19.5%	22.92%
35-44	14.9%	17.31%
45-54	16.1%	19.31%
55-64	17.3%	20.00%
65+	18.7%	5.00%

Appendix 6

Sample regional and urbanity distribution vs. population distribution

Region	Urban		Rural	
	Population Census (18+, in %)	Achieved sample size (in %)	Population Census (18+, in %)	Achieved sample size (in %)
Berat	49.4%	50.9%	50.6%	49.1%
Diber	28.3%	26.9%	71.7%	73.1%
Durres	77.2%	74.6%	22.8%	25.4%
Elbasan	42.7%	46%	57.3%	54%
Fier	43.6%	41.4%	56.4%	58.6%
Gjirokaster	56.3%	63%	43.7%	37%
Korce	44.2%	40.2%	55.8%	59.8%
Kukes	36.5%	40.6%	63.5%	59.4%
Lezhe	56.7%	50%	43.3%	50%
Shkoder	48.7%	47.3%	51.3%	52.7%
Tirane	73.4%	74%	26.6%	26%
Vlore	68.9%	69.3%	31.1%	30.7%
Total	57%	43%	59%	41%

Appendix 7

Response rate statistics

Call Status	Cases	%
Refusals	269	3.6%
Not available	645	8.5%
Turned off	72	1%
Does not exist	4388	58.1%
No answer	645	8.5%
No signal	28	0.4%
Interrupted	25	0.3%
No interest in participating	153	2.0%
Out of sample/quota	21	0.3%
Replaced after quality control	5	0.1%
Successful	1300	17.2%
Total	7551	

Appendix 8

Ethnic Group

Ethnic Group to which you belong?	Overall	Men	Women
Albanian	99.3%	99.5%	99.1%
Roma/Egyptian	0.5%	0.2%	0.9%
Greek	0.2%	0.3%	0%
Other Specify	0%	0%	0%

Appendix 9

Distribution of sample per role in the household

Head or household/Not head of household	Overall	Men	Women
Yes	43.7%	67.8%	19.9%
No	56.3%	32.2%	80.1%

Appendix 10

Impact of COVID-19 on income generating sources (N=1300)

Earning Source	Increased	No change	Decreased	Not an income source
Income/earnings from farming	0%	6%	12%	82%
Income/earnings from own business/family business, freelancer activity	1%	3%	21%	75%
Income/earnings from a paid job	0%	26%	26%	47%
Income from properties, investments/saving	1%	7%	20%	73%
Pensions, other social payments	7%	10%	1%	82%
Food from farming, animals or fishing	1%	18%	17%	64%
Money received from people living abroad	1%	4%	14%	81%
Support from family/friends in the country	2%	6%	9%	83%
Government support	2%	5%	2%	92%
Support/Charity from NGOs	1%	1%	1%	97%

Appendix 11

Distribution of household chores among household members

Answer Category	Overall	Men	Women
My partner helps more with household chores and/or caring for family			
Yes	56.1%	66.6%	45.7%
No	13.4%	6%	20.6%
Not applicable	30.5%	27.4%	33.6%
My daughter(s) helps more with household chores and /or caring for family			
Yes	20.2%	19.8%	20.6%
No	14.9%	14.4%	15.4%
Not applicable	64.8%	65.8%	63.9%
My son(s) helps more with household chores and/or caring for family			
Yes	20.7%	21.8%	19.6%
No	19.8%	19.7%	19.9%
Not applicable	59.5%	58.5%	60.6%
Other family/household members help more with household chores and/or caring for			
Yes	50.8%	53.6%	48.8%
No	12%	8.8%	15.1%
Not applicable	37.2%	37.6%	36.9%
Hired a domestic worker/babysitter / nurse			
Yes	0.9%	0.8%	1.1%
No	28.6%	25.4%	31.8%
Not applicable	70.5%	73.8%	67.1%
Domestic worker/babysitter/nurse works longer hours with us			
Yes	0.2%	0.3%	0.2%
No	6.7%	4.5%	8.9%
Not applicable	93.1%	95.2%	91%
Domestic worker/babysitter/nurse no longer works with us			
Yes	1.2%	1.1%	1.4%
No	5.2%	4.2%	6.3%
Not applicable	93.5%	94.7%	92.4%
I am on my own, no one can help me with household chores and caring for family			
Yes	5.7%	3.9%	7.5%
No	21.2%	20.6%	21.7%
Not applicable	73.2%	75.5%	70.8%

Appendix 12

Proportion of individuals reporting difficulties due to COVID-19

	Answers	Overall	Men	Women
Physical illness	Yes	4.8%	3.9%	5.7%
	No	94.1%	95.0%	93.1%
	Not applicable	1.2%	1.1%	1.2%
Illness of a family/household member	Yes	4.2%	2.8%	5.5%
	No	93.5%	95.5%	91.6%
	Not applicable	2.3%	1.7%	2.9%
Death of a family/household member	Yes	1%	0.8%	1.2%
	No	96.4%	97.2%	95.6%
	Not applicable	2.6%	2%	3.2%
Psychological/Mental/Emotional health was affected (e.g. stress, anxiety, etc.)	Yes	63%	57.3%	68.7%
	No	36.6%	42.4%	30.9%
	Not applicable	0.4%	0.3%	0.5%
Migrated/moved to different geographical area within the same country	Yes	7.8%	10.4%	5.4%
	No	90.6%	88.4%	92.8%
	Not applicable	1.5%	1.2%	1.8%
Recently returned from abroad	Yes	1.3%	2%	0.6%
	No	95.9%	95.4%	96.5%
	Not applicable	2.8%	2.6%	2.9%

Appendix 13

Proportion of individuals reporting difficulties in accessing health services

Questions	Category of Answers	Frequency (in %)
Gynecological and obstetric care services for myself	No need for these products	89%
	Yes, but I did not face any difficulties	4.1%
	Yes, and I faced some difficulties	2.3%
	Yes, and I faced major difficulties	2.3%
	Refuse to answer	2.3%
Contraceptives	No need for these products	93%
	Yes, but I did not face any difficulties	2.3%
	Yes, and I faced some difficulties	0.5%
	Yes, and I faced major difficulties	0.2%
	Refuse to answer	4.1%

Appendix 14

Main source of information used by public on COVID-19 pandemic situation

	Overall	Men	Women
Internet & social media (Facebook, Instagram, etc.)	30.5%	28.5%	32.4%
Official Government websites	4%	4.6%	3.4%
Radio/Television/Newspaper	59.7%	61.9%	57.5%
Public service announcement/speaker (central and local government/municipality)	2.5%	1.4%	3.5%
Phone/Communication apps (Telegram, Viber, Whatsapp, or call)	0.8%	0.9%	0.6%
Community, including family and friends	1.1%	0.8%	1.4%
Health center/Family doctor	0.9%	0.8%	1.1%
NGO/Civil Society organization	0.2%	0.3%	0%
Other	0.3%	0.5%	0.2%
Do not know about Coronavirus COVID19	0.2%	0.3%	0%

REFERENCES

1. United Nations Secretary General, Policy Brief, (2020). Accessed from: <https://www.un.org/en/coronavirus/un-secretary-general>.

2. Northern Regions include district of Dibër, Durrës, Kukës, Lezhë and Shkodër (see <http://www.instat.gov.al/media/4938/vjetari-statistikor-rajonal-2018.pdf>)

3. Southern Region involves districts of Berat, Fier, Gjirokastrë, Korçë and Vlorë (see <http://www.instat.gov.al/media/4938/vjetari-statistikor-rajonal-2018.pdf>)



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