

LAW & SOCIETY TRUST

A GENERAL PUBLIC SURVEY IN SRI LANKA

"IMPACT OF THE COVID-19 PANDEMIC ON THE LIVES OF PEOPLE"

The Law & Society Trust presents a report on impact of the COVID-19 pandemic on lives of people in Sri Lanka based on the data collected from a public survey during 2021

April 2022

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Dr. Sakuntala Kadirgamar - Executive Director

EXECUTIVE SUMMARY

The Law and Society Trust initiated a general public survey across the country to investigate the impact of the COVID -19 pandemic on the life of people in Sri Lanka.

The survey, using 40 questions explores the impact of covid on the employment, finances, social and emotional life of people as well as their changes to their behaviours and their life circumstances that have taken place over the period. The survey clusters around 11 themes. Specifically, the survey focuses on the: post pandemic income and working environment, transportation during the pandemic, social and emotional life of people, their life circumstances, financial concerns and access to support. It also focuses on and their exposure to COVID -19 and the vaccination process and issues surrounding it.

Over 500 paper surveys (in Sinhala, Tamil and English) were distributed across the 15 districts of which 374 filled data sheets (74.80%) were returned. The 15 districts were: Colombo, Gampaha, Kalutara, Kandy, Matale, Kegalle, Jaffna, Kilinochchi, Mannar, Mullaitivu, Vavuniya, Anuradhapura, Ampara, Matara and Galle.

The participants for the study were drawn from a range of sectors and occupations. They included people employed in the private sector and the government sector, farmers, people engaged in animal husbandry and the fisher community. There were also people employed in the INGO/NGO sector and from academic institutes. Some participants worked in the tourism sector, were self-employed and worked in the informal sector. There were also retirees and a few unemployed participants.

The team has successfully collected data on the impact of COVID – 19 pandemic on the lives of people from 400 participants.

For the selected sample, the impact of COVID – 19 on employment was marginal. However, these results may significantly differ from another study that my focus on another sample which is either larger in size or employed in different sectors. Furthermore, many began to work from home and have subjectively stated there was an increase in their performance.

In exploring their social life, it was noted that the participants are primarily in contact with close family members on a daily basis and are likely to reach out to them as well as friends for any help or share any worries.

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Finances have been a major concern observed in the survey amongst participants where many struggle to manage with family expenses in the aftermath of the pandemic, and many had taken loans to cover their living expenses. During this crisis while those who noted that they received support from other institutions to survive the pandemic, noted that the government support was the most accessible. However, a worryingly high number noted that they have not received any form of support. Furthermore, the community level measures or public awareness to manage the pandemic had not reached out to 1/5 of the population and these figures indicate a gap in both communications and connectivity.

It was observed that many of our behaviours had changed with the incorporation of new habits and the shedding of some previous practices to respond to the health and safety guidelines of the COVID – 19. The importance of following these instructions as responsible citizens were further highlighted by the participants in their general comments. Hence the pandemic brought about some positive behavioural changes.

The purposes of the survey were to engage with citizens and gather information on their experiences, both positive and negative experiences during the pandemic. It provided insights into their struggles and challenges and their resilience.

This information, when used intelligently can support the framing of public policies that are responsive to community needs. During the pandemic, when it was not possible to gather with people and hear their stories, the survey provided a window of opportunity.

Methodology

Introduction

The methodology of this study is discussed below. Specifically, this section will look at the data collection technique that was chosen for this study which includes a description of the selection of participants and explores the survey method.

Design

This study addresses the following research question: "Exploring the impact of the COVID-19 pandemic on the lives of people." The aim of the study was to gain an in-depth understanding of the personal experiences and feelings of people during the pandemic. Thus, the initial plan was to use a survey questionnaire along with focus group discussions (FGD) and in-depth interviews. However, frequent lockdowns prevented the research team from conducting interviews and FGDs and the conduct of the survey too was impacted by the rising rates of infection and frequent lockdowns. The survey was the only means of data collection used in this study due to the health advisories.

Desk review research was conducted on the COVID situation before the formulation of the questionnaires. Due to the limitation of time, the questionnaire was made by analysing some of the existing questionnaires which focused on COVID and they were re-formulated to focus on the survey targets. Some of the questions were developed with the aim of identifying the participant's lived realities and experiences including their mental status.

Due to the time limitation, the questionnaire was developed and translated into national languages within one week. Therefore, the questionnaire did not go through a validation process.

Selection of participants

The study is set within the broad context of rural and urban society. The participants in this study consisted of Sinhala, Tamil, and English-speaking people in different parts of the country. The study was not designed to focus on

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the impact of covid on the basis of ethnicity per se. Furthermore, the views of all the different ethnic communities living in rural and urban areas were not necessarily represented in the study.

As the study focuses on the impact of the pandemic and how it affects people's day-to-day lives in general, the study did not analyse how the pandemic affected different socio-economic groups.

The study focuses on how people were feeling during the pandemic - attempting to capture their emotions, perceptions and experiences.

The respondents were personally approached through CSO (Civil Society organizations) networks and via personal contacts. The purpose of the study was explained to them and participation was voluntary and anonymous. They were assured of the confidential handling of all research data while obtaining informed consent to participate in the study by filling in the survey questionnaire. All participants were required to complete an informed consent form.

Data collecting technique

The data collection technique chosen by a researcher determines what type of data is collected and therefore it influences the results and conclusions that are drawn from a study.

Recognising this, the research team appointed several individuals to distribute and collect the survey questionnaires. The research team had several prior meetings with the assistants selected to conduct the surveys and they also had several discussions about the research process over the phone. Some of the questionnaires were filled out at the workshops that were conducted in different parts of the country, such as Kandy, Jaffna, Vavuniya, and Matale. Most of these questionnaires were distributed among grass-roots level citizens, and they were collected later.

The first part of the survey consists of structured questions to obtain factual information such as the biographical data relating to the background of the participants, their age, gender, marital status and occupation. This does not add value.

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The second part of the questionnaire consists of questions relating to how the pandemic affected their occupation, how they managed their workplace duties during the pandemic, especially during the period of lock-down, etc.

The third section consists of questions that related to relationships, attachments, happiness, love, and well-being.

The fourth section includes questions related to workplace performance and expectations, and the fifth section consists of questions relating to their social life in times of the COVID pandemic.

The seventh, eighth, and ninth sections contain questions about life and financial circumstances, as well as the children's educational expenses. Finally, there were questions relating to the government's support during the pandemic and the psychological impact of a long-term lock-down.

Limitations

The survey questions were not validated through a sample testing process, neither were the translations tested and validated. Hence, the results were dependent on the level of knowledge of the participants. This is one of the main limitations.

When the results were analysed, it was subsequently pointed out that some questions were not clear or elicited complex responses that were difficult to tabulate.

It is possible that the participants who live in rural areas, especially different geographical areas, might exhibit different psychological tendencies than people who live in urban and suburban areas due to their living circumstances. In gathering data on the impact of the pandemic, the survey did not factor in literacy levels of the participants and the need to use other colloquial languages.

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Furthermore, there are some limitations to this study due to unexpected lockdowns and travel restrictions due to the COVID spike. Finally, collecting and distributing questionnaires was a big challenge because of the country's situation, and researchers had to spend more time on achieving their target.

Ethical consideration

The procedures of the study sufficiently maintained the respondents' privacy, welfare, civil liberties, and rights. All respondents were guaranteed that their participation and responses were confidential. No individual or individual workplace was recognized in the results.

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INTRODUCTION

The Coronavirus (COVID-19) was first identified in late 2019 in Wuhan, China and in a matter of days to weeks it spread across the world creating significant shocks and required great adjustment to our day to day lives. The first case of in Sri Lanka was confirmed on 27th of January 2020, just three days prior to the World Health Organization declaring an international public health emergency

The impact of the global pandemic was severe but it was not limited to the health of the world population. As stated by the United Nations, *“the COVID-19 pandemic is far more than a health crisis: it is affecting societies and economies at their core”* (United Nations, 2020).

Sri Lanka, categorized as a lower – middle – income country where industries such as tourism played a substantial role in sustaining the economy and the livelihood of households, was abruptly put on hold, and has remained so since the pandemic. The UNICEF report on Sri Lanka (May 2020) made assumptions based on existing data, noting that the average income of a household decreased between 21% - 31% following the pandemic.

Thus, the Law and Society Trust of Sri Lanka initiated a general public survey across the country to investigate the impact of the COVID -19 pandemic on the life of people in Sri Lanka.

The survey, using 40 questions explores the employment, financial consequences of the general population, the impact on their social and emotional states as well as their changes to behaviours taken place over the period. Over 500 paper surveys (both in Sinhala / Tamil and English) were distributed across districts of which 374 filled data sheets (74.80%) were returned.

1. SOCIO-DEMOGRAPHIC AND EMPLOYMENT CHARACTERISTICS

The list of districts participants who participated in the survey are noted below. Most of the participants were reported from the Kandy area recording a 23% of the total population. 15.5% reported from Jaffna, Ampara and Matale 13% and 12.8% in order. Colombo recording a participation rate of 9.8%

1. Colombo
2. Gampaha
3. Kalutara
4. Kandy
5. Matale
6. Kegalle
7. Jaffna
8. Kilinochchi
9. Mannar
10. Mullaitivu
11. Vavuniya
12. Anuradhapura
13. Ampara
14. Matara
15. Galle

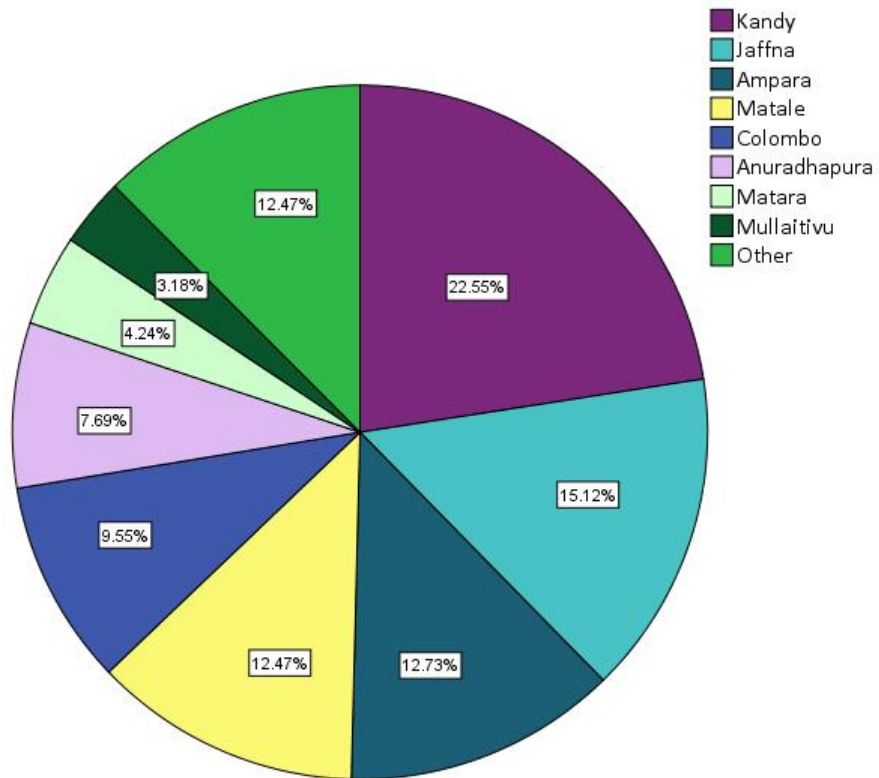


Figure 1: Districts of participants

Gender distribution with approximately 38% males and 59% females. **Age** group of participants varied from 19 years to 82 years of age of which the most common age group being from 35 to 50.

Employment and Income Status

Majority of the participants for the study were employed in the Private Sector or Government Sector (15.9%; 15.6%). 10.6% of the participants were farmers and / or engaged in animal husbandry while 4.8% were fishermen. INGO/NGO related employment were found within 7.4% of the participants. A small percentage, i.e., 5.3% were employed in academic institutes while an exceedingly small percentage of 1.9% participants were in the tourism sector.

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Of those reported to be “self-employed” (11.1%), the most common forms of self-employment were stated as tailoring / sewing clothes and preparing cooked meals for selling purposes. The “other” section consisted of 12.7% participants reporting range of employment most identified to be daily wage jobs, driving (three – wheelers) and being in the industry of small boutique shops or restaurants.

3.5% of all participants were either retired (1.9%) or unemployed (1.6%)

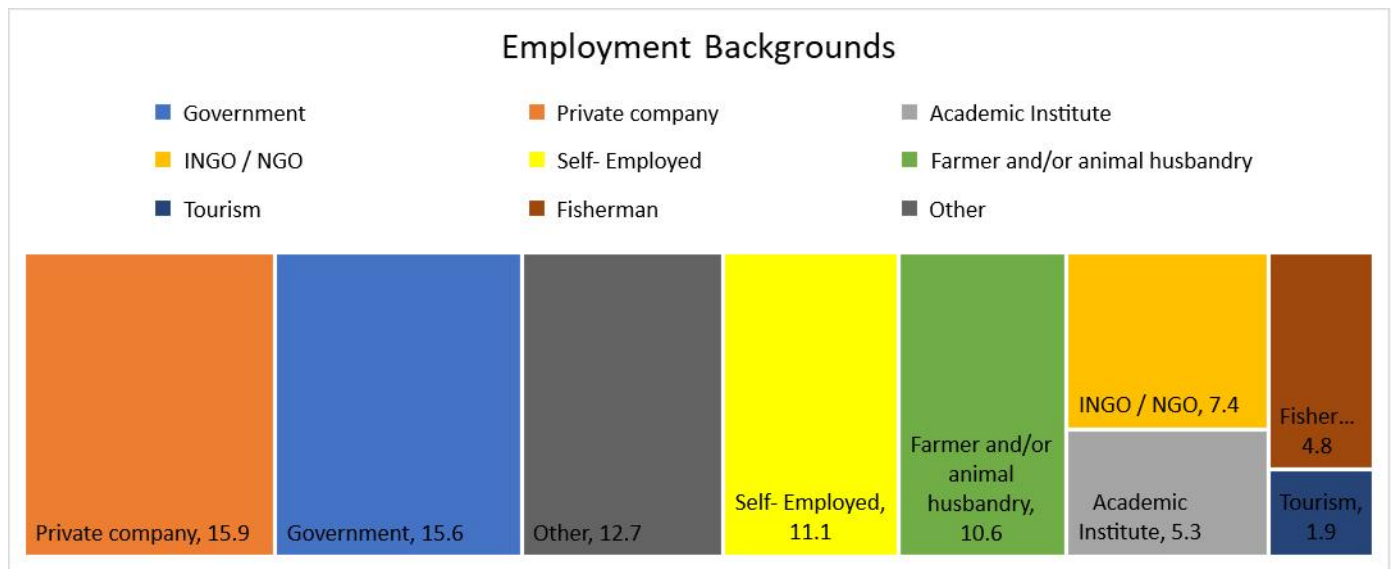


Figure 2: Employment and background

Most of the participants received a monthly income (49.1%) while others relied on daily income (12.7%) and seasonal income (12.5%) which includes farmers whose farming depends on seasons for cultivation, industries such as tourism also a seasonal sector which also affects the boutiques. 3.7% depended on a weekly income.

2. POST PANDEMIC INCOME AND WORKING ENVIRONMENT

Since the pandemic, the work environment and structures were shifted with government-ordered lockdowns, long quarantine periods and the introduction of the work-from-home concept, in order to keep the spread of the

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virus under control. Considering these factors, series of questions were asked in relation to the changes in income, the workload as well as the performance and support received under the work- from-home structure.

In response to the question *“Has there been a reduction in level of employment/salary due to COVID-19?”* Majority of the participants (49%) stated they were impacted, with 42% stating otherwise. According to participants’ responses, the impact of the COVID on employment and income status of the selected participants were not significant. However, with wider exploration of the population in Sri Lanka we may receive different results.

Among those who noted that their employment was affected post COVID, several reasons for this were identified. As per the table below, 51.3% of the participants stated that while they are still employed, their income has been reduced. Others had been laid off or have had unpaid leave (7.4%). A few stayed back to care for children who were not in school (18.8%) or to care for someone with COVID or elderly persons. Some other factors were identified factors for contributing to reduced earning capacities such as the impact of covid on their fishing and farming. People were not able to sell the products and there was a reduced demand for daily wage workers, possibly due to the lock down periods and the cutbacks to reduce expenses.

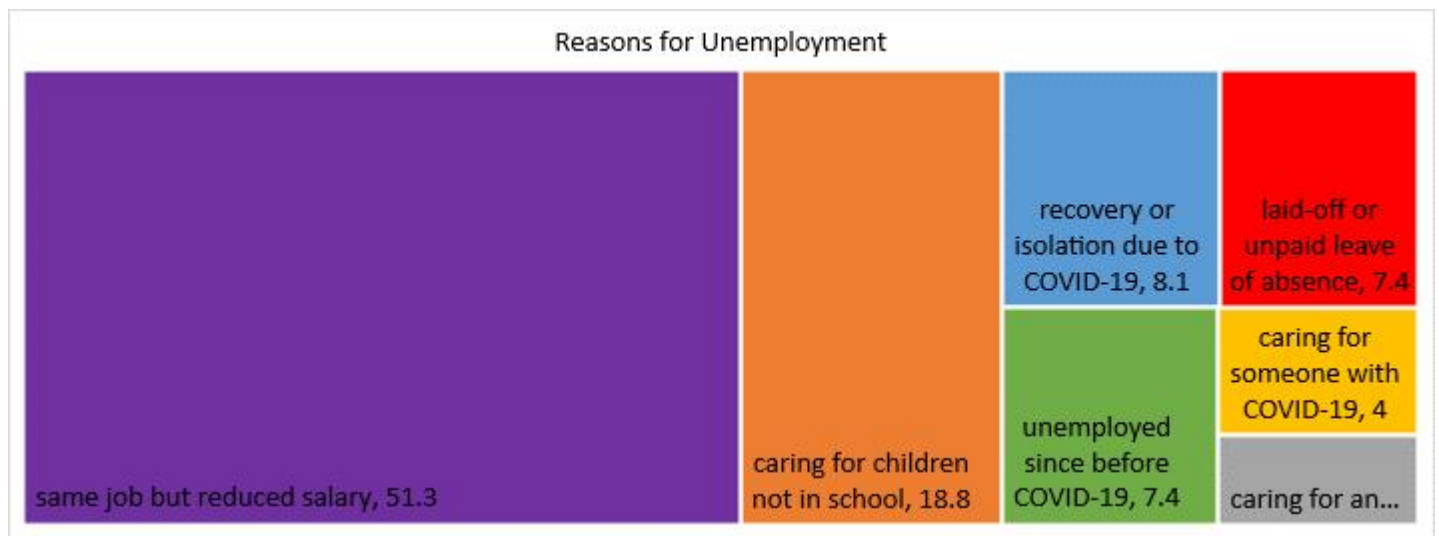


Figure 3: Reasons for unemployment

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As per the survey, most of the participants stated that on average their workload now has become less compared to their workload in the pre-pandemic period.

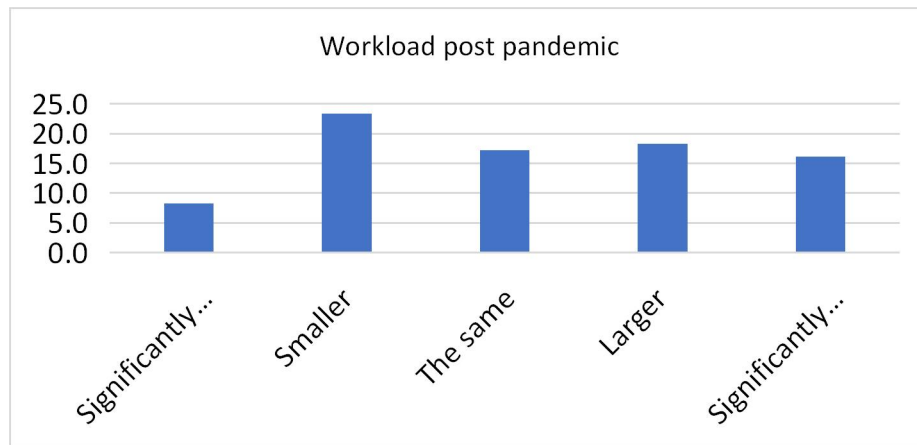


Figure 4: Post pandemic workload

Working from home also requires the support of those around you as well as access to resources such as devices and connectivity. Participants were asked how satisfied they were with the support of family, senior authorities, and workplace colleagues and the results received indicated that the majority of the participants were neutral about the terms of the support received when engaging in work from home.

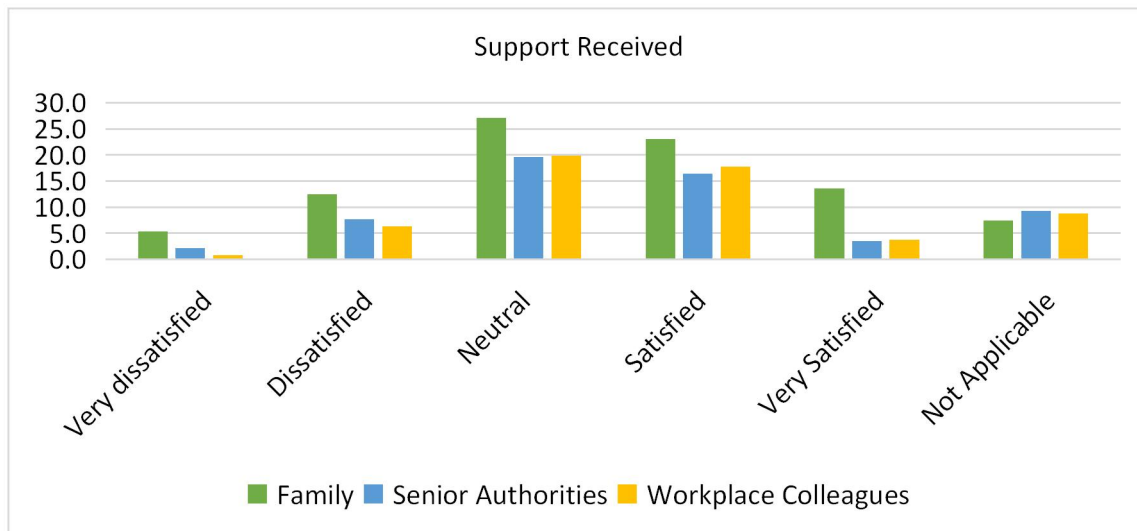


Figure 5: Support received

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With regard to the resources required to work from home, the majority of the participants indicated dissatisfaction with the data coverage cost. Accessibility, as per the survey was assumed to be the accessibility to data connectivity. Survey responses indicated a neutral stand on this issue. While effectiveness has been rated as neutral by a majority, it is advised to take the latter finding more cautiously, as “effectiveness” was not specified thus is likely to have been subjected to ambiguity and open to interpretation.

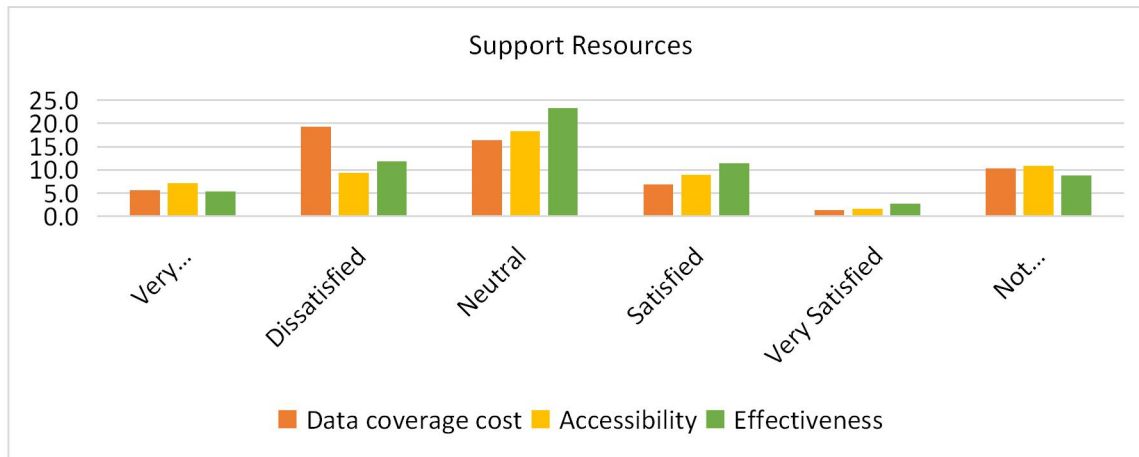


Figure 6: Support resources

It must be highlighted that the data gathered on the work-from-home system and the conclusion drawn from this must be done cautiously as there were participants selected for the study from industries that do not include the work-from-home concept such as, agriculture, fishery, taxi driving among others

In view of the new working environment and method of working, participants were asked to what extent they agree with statements related to their subjective evaluation of work performance compared to pre COVID -19. Of the statements presented, the majority selected a neutral level of agreement. However, a large number of participants agreed that it had been difficult for them to work from home, compared to working from the office (15.6%), but they had adapted well to the new working environment (20.4), while being able to figure out the challenges of working from home (15.9%). Many disagreed with the statement that their performance had declined since the lockdown.

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However, for close to 11.5% of our participants, these statements were not applicable. It is most likely that they are retired, unemployed or as mentioned earlier, the working-from-home concept does not apply for their relevant industries.

Table 1
Changes in Work Performance

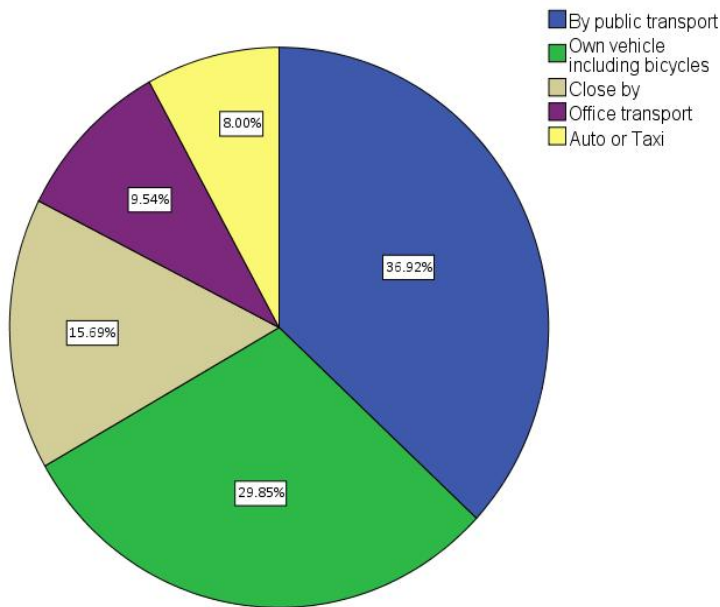
Statement	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Not applicable
<i>It is more difficult for me to focus during period of work from home in comparison to office</i>	1.3	6.9	19.9	15.6	3.7	12.7
<i>My performance has improved during the period of lock-down</i>	2.1	9.5	27.6	9	1.1	11.7
<i>My performance has worsened since lock-down period</i>	4.5	16.2	17.2	6.6	4	12.2
<i>I have adapted well to the new working methods and learning experience</i>	0.8	4.8	20.7	20.4	5.8	10.1
<i>I can figure out how to do the most difficult work since work from home</i>	4.2	5.3	28.1	15.9	5.8	10.3

Figure 2

Given the notion that the level of support received impact on level of work performance and is vital for the success of working-from-home, a correlation analysis was computed to assess the relationship between the statements made under “support received” and the statements made on “performance evaluation.” While the correlation was significant at P value 0.01, there were no strong positive or negative correlation that was calculated. This indicates that the level of support received does not coincide with the level of work performance.

3. TRANSPORTATION DURING PANDEMIC

Since the pandemic, transportation has been an issue. Public transportation increased exposure to the virus. The survey indicated that 37% of the participants used public transport and thus the most common mode of transportation of our participants was public transportation. Approximately 30% of the participants had their own vehicle, most commonly it was a motorbike or a bicycle, and over 15% stated they did not need to worry about mode of their transportation as they lived in close proximity to their workplace. Others used office transportation services or taxis or trishaws.



To explore the issues around transportation further, researchers inquired whether the cost has been affordable for those who use taxis as a common mode of transportation. 7.7% responded **Yes**, 39.3% stated **No** while over 25% noted that they could not draw any conclusions on the issue of affordability.

Figure 7: Common mode of transportation

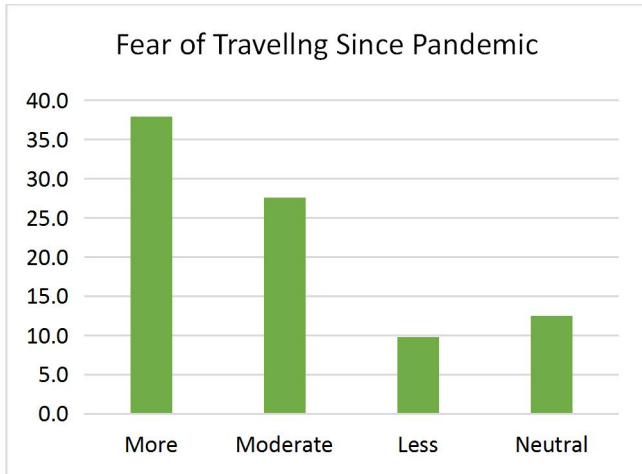


Figure 8: Fear of travelling since pandemic

The most probing question raised in the survey was on the level of fear participants experienced with regard to travel since the pandemic. As the table below indicates, close to 38% state they experienced increased fear, with over 27% stating a moderate level of fear. But 12.5% participants remained neutral with no elevated or decreased fear since the pandemic.

4. SOCIAL LIFE

Since 2019, social life has been greatly affected as interactions have been limited due to lockdowns, restricted travel and extended periods of quarantine. The researchers sought to identify how often the participants have been communicating with different social groups by phone/social media since the COVID-19 pandemic.

The groups of interest as outlined below were noted and were investigated for information on their communication on a daily / weekly / monthly basis as well as whether no communication has taken place over a month.

1. Close Family Member
2. Distant Family Member
3. Friend
4. Neighbour
5. Colleague from class
6. Teacher / Lecturer
7. Volunteer Organization
8. Social Network

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Close family members, distant family members, neighbours, and friends as anticipated had been the main social groups kept in communication on a daily / weekly basis. The majority stated they had not been in communication with teachers and lecturers, and this could be due to the halt in physical classes and also because the groups of participants were not part of any educational institute. They also noted that they were not in communication with volunteer organizations.

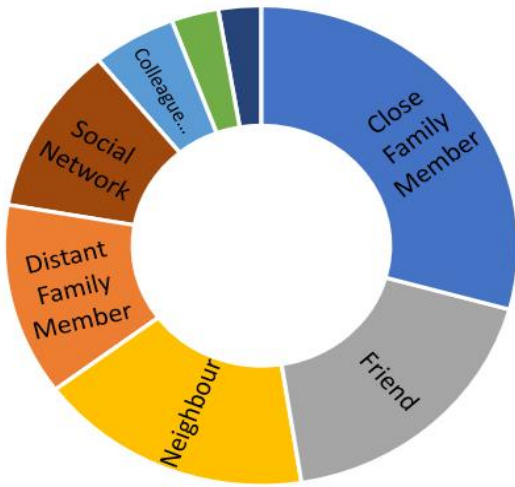


Figure 9: Daily communication

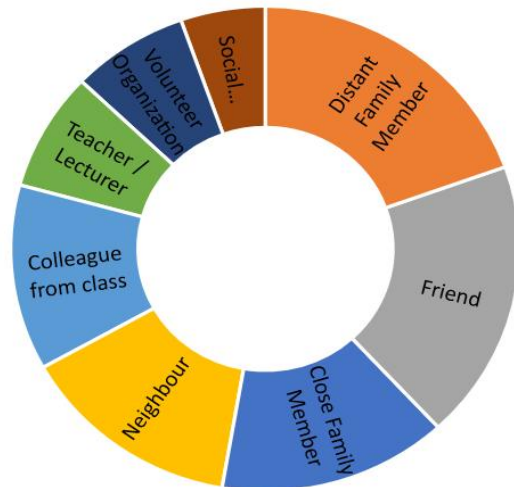


Figure 10: Weekly communication



Figure 11: Monthly communication

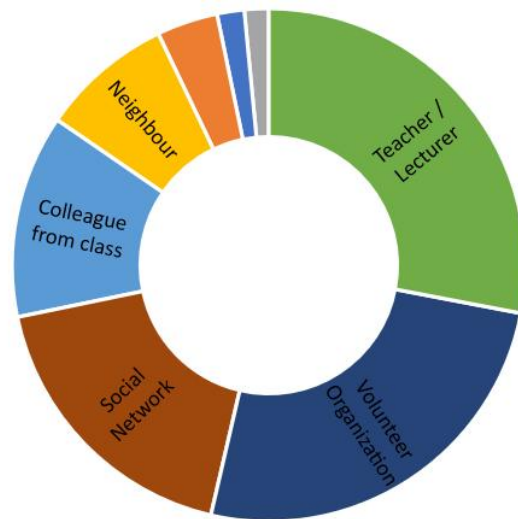


Figure 12 Never in Communication

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Social interaction does not only mean staying connected. It also refers to reaching out to them for help and / or advice. A series of hypothetical situations were presented ranging from being sick, having a low mood, concerns on career, academics or relationships and participants were asked to select the group they are most likely to reach out to for support.

In all the statements presented, it was clearly identified, as anticipated, that a family member was the first person the participant would reach out to for support. The second most popular choice for support was also looked in to and it was noted that in all statements, participants were likely to reach out to a close friend, with the exception of needing someone to help out if the participant was sick. In the case of sickness, there were multiple choices reflected, indicating that participants would reach out to several social groups.

Interestingly, when participants wanted to talk about the COVID – 19 crises, they were most likely to reach out to a family member. The second option chosen by a majority was either to reach out to a close friend OR to not reach out to anyone. These two showed the same score. Apart from these options, participants had also identified social networks as a source they would reach out to talk about the COVID – 19 crises and related issues.

When it came to talk about problems related to studies as well as future educational prospects and goals, turning to the administrative staff were the third most popular choice. The participants are also likely to reach out to someone they live with for emotional support when feeling low, needing help when sick, and for advice on personal finances, family, and relationships as well as advice on future professional career plans. It was considered to be a strength and positive factor where participants expressed multiple choices, as this indicated a strong social support system. However, respondents had stated that there are instances where they would not talk to anyone else. Most participants had stated that they would not reach out to discuss their future academic plans and career goals.

needed help if you were sick

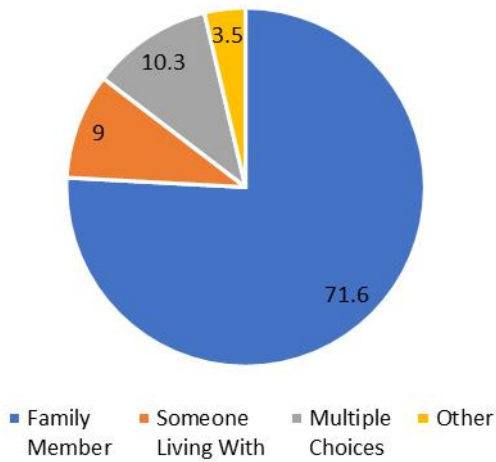


Figure 13: Need for help when sick

“Help you around your home if you were sick and had to stay in bed for a few days.”

Family members are the ones first reached out to most of the time (71.6%), followed by someone the participant was living with (9%).

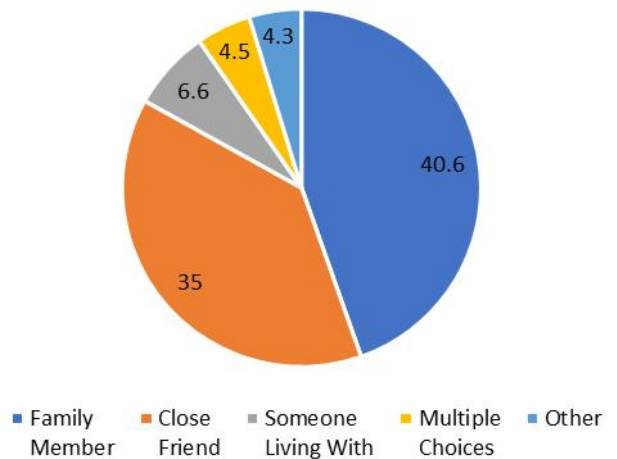
It was positively noted that for this question, 10.3% of the participants noted multiple choices indicating strong social support system and openness to seek help when ill.

“You felt low or depressed and wanted to talk about your state of mind, health or circumstances”

When needing psychological support, family members and close friends (40.6%; 35%) were considered to be the social groups to approach.

However, other social groups were also approached. Here too multiple choices were made by 4.5% of the participants indicating the potential for a wider outreach. When discussing psychological need, it must be noted that such discussions are mostly limited to family members and close friends and there is a reluctance to reach out to others.

felt low or depressed



In relation to the two questions, **“Want to talk about problems related to: - Studies (lectures, seminars, practical work)”** and to talk about **“future education and long-term educational goals”**, after reaching out to family and friends, participants were more likely to reach out to university administrative staff members

talk about problems on studies

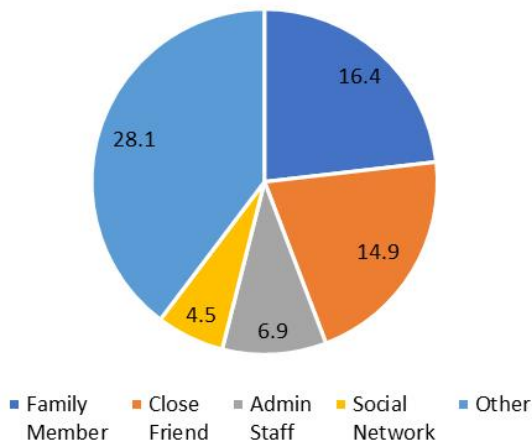


Figure 14: Whom to talk on study problems

future education & goals

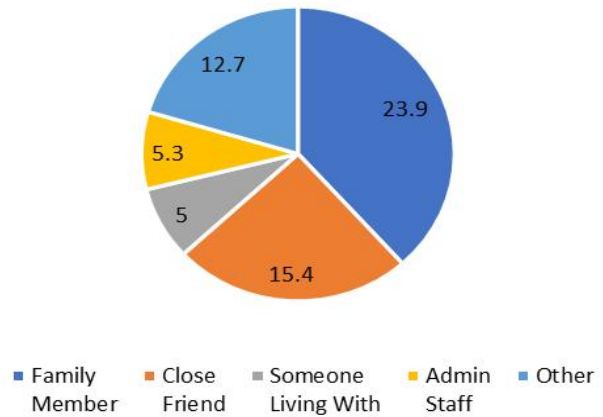


Figure 15: Whom to talk about future education and goals

To converse about **personal financial situations**, participants were most likely to reach out to family members (41.1%). However, the chances of reaching out to other social groups were, interestingly, less than 10%, indicating a possible reluctance to discuss personal financial issues with those who are not immediate family members

Personal finances

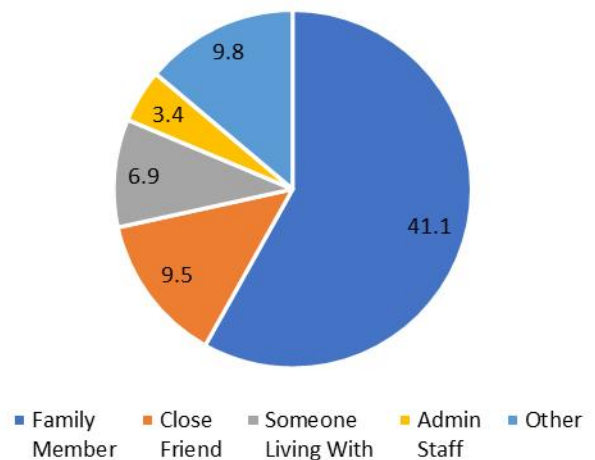
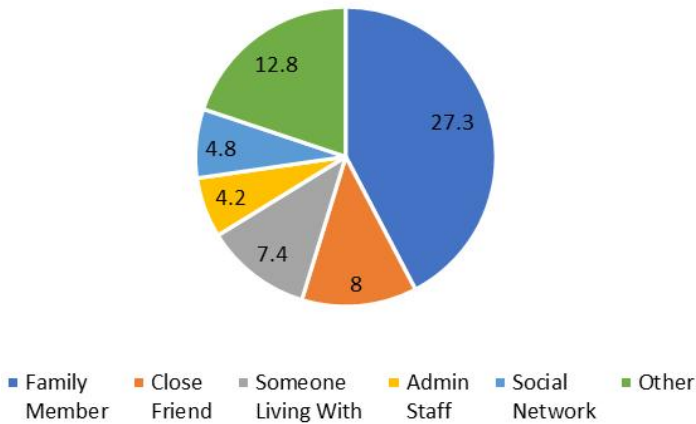


Figure 16: Whom to talk about personal finances

future professional career



Concerns about **future professional career** are widely shared with close family members. Apart from the common groups reached out to so far, when it came to professional careers participants are likely to reach out to social networks as well.

Other unspecified sources of support were recorded, standing at 12.8%.

Figure 17: whom to talk about future professional career

Discussing concerns about **family and relationships**, 57% of the participants would reach out to family members.

With less than 10% opting to speak to close friends, or someone they are living with, indicated that participants feel less comfortable to reach out to those who are considered outside their close family

family and Relationships

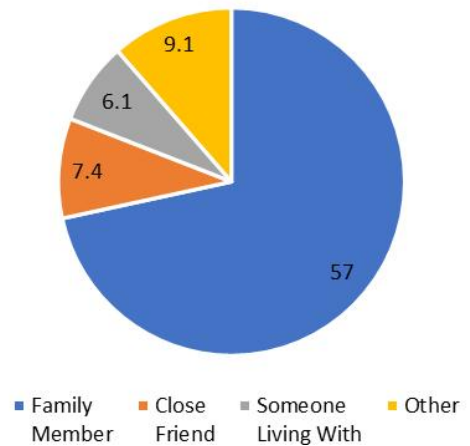
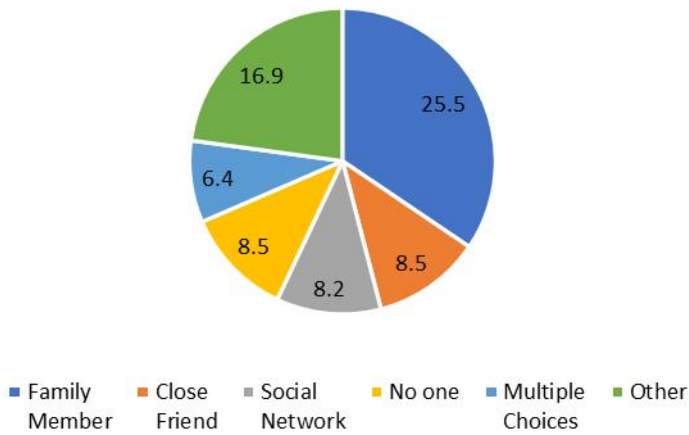


Figure 18: Whom to talk about family & relationships

Talk about COVID - 19 Crisis



To talk about the COVID – 19 Crisis Situation

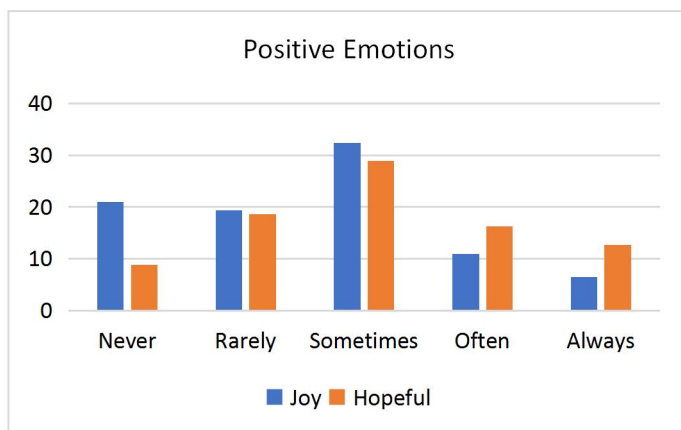
Apart from reaching out to family members (25.5%), participants would also reach out to close friends (8.5%) and to social networks (8.2%).

Interestingly, talking with close friends at 8.5% is that participants will NOT reach out to anyone to talk about the pandemic situation.

Figure 19: Whom to talk about the COVID-19 crisis

5. EMOTIONAL LIFE

The pandemic had taken a toll on many individuals' physical health, livelihoods, social interactions as well as their emotional wellbeing. Apart from attempting to establish through a series of questions in the previous series, that social interaction is important for the psychological wellbeing of the participants, researchers were also interested in identifying the emotional experiences of the general population since the news of the pandemic. For this purpose, a series of positive and negative emotions were explored.



Exploring positive emotions such as Joy and Hopefulness, most participants felt these emotions only sometimes while attending to their work and preparing for the day since the outbreak of COVID-19 in their area.

Figure 20: Positive emotions

Exploring negative emotions, the most common response of participants was that they were increasingly anxious, and sometimes felt anger and hopelessness. Participants did not report a high level of frustration.

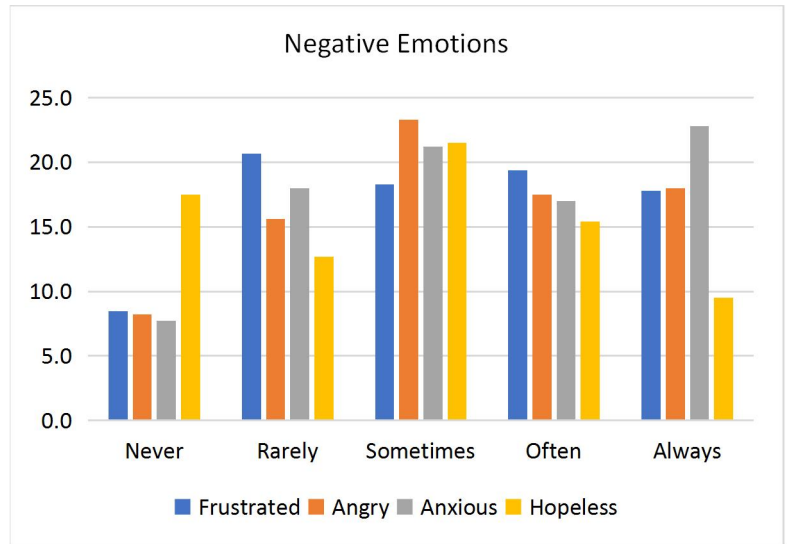


Figure 21: Negative emotions

6. LIFE CIRCUMSTANCES

Participants were presented with series of situations and were asked how often they worried about their personal circumstances in areas such as personal health, education, finance and employment, family health and relationships. The frequency of being occupied thinking about the identified life circumstances were rated from worrying a little of the time to worrying all of the time.

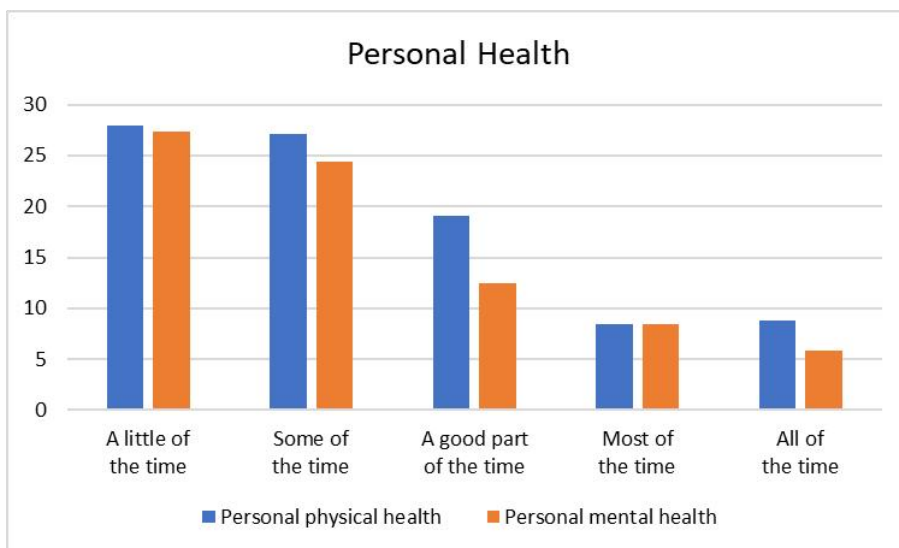


Figure: 22 Personal Health

Majority of participants (over 50%) stated that they worried about their personal and mental health only a little of the time about or only some of the time. Less than 10% of the participants mentioned that they worried about their personal physical and mental health all of the time.

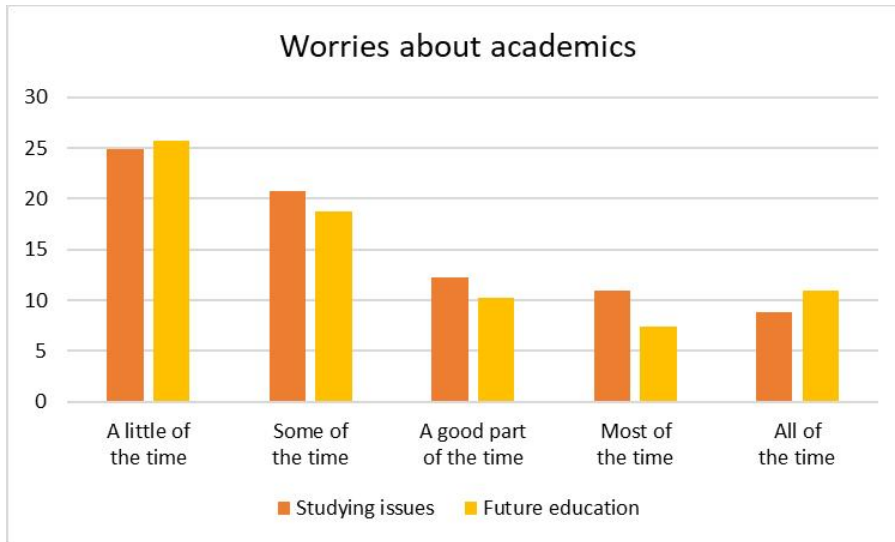


Figure 23: Worry about academic work

Concerns relating to academic work, including studying as well as their future education, (approx. 25%), of participants spent a little or only some of the time to worry about the same.

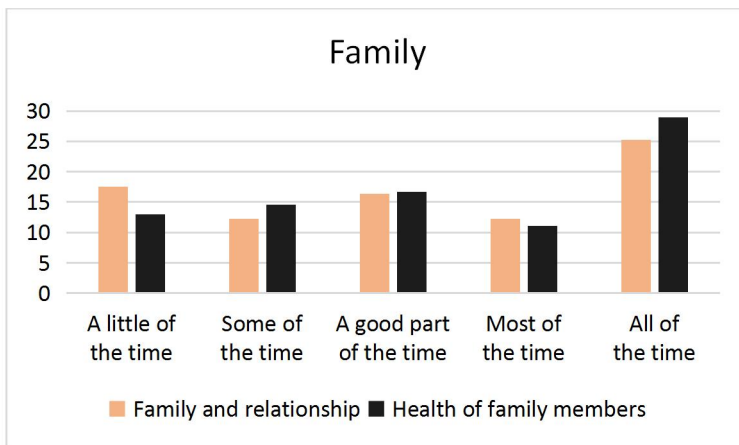


Figure 24: Worry about family

Majority of the participants were worried about the health of their family members and relationships all of the time, followed by the second largest response of being worried about family a little of the time and worrying about the health of family a good part of the time.

Worries about personal finances and future professional career took place all of the time in participants' life.

Regarding professional careers, the second most popular response was worries about it some of the time, whereas worries about personal finances preoccupied a good part of the participants' time.

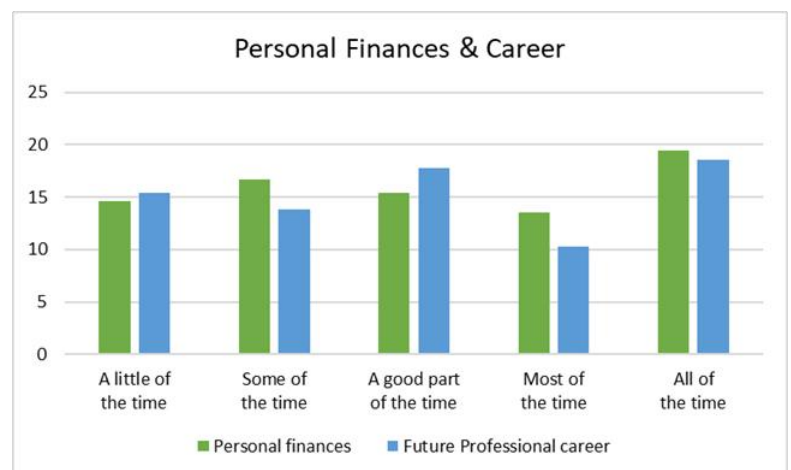
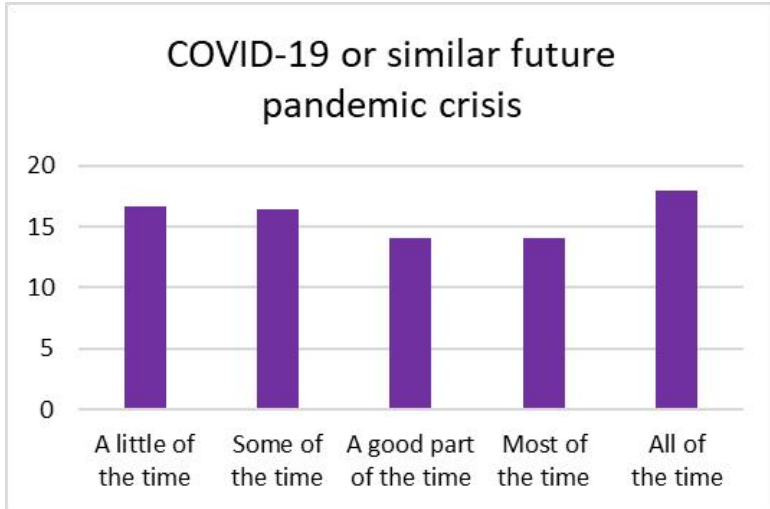


Figure 25: Worry about personal finances



Worrying about the COVID – 19 virus or even the possibilities of other future pandemic crises had similar responses the participants. The response most commonly chosen among participants was being worried about it all of the time.

Figure 26: Worry about pandemic

Following the pandemic, participants worried about their leisure activities, sports and cultural activities and other social life aspects only for a little part or some of their time indicating that these concerns were not a major aspect of their worries

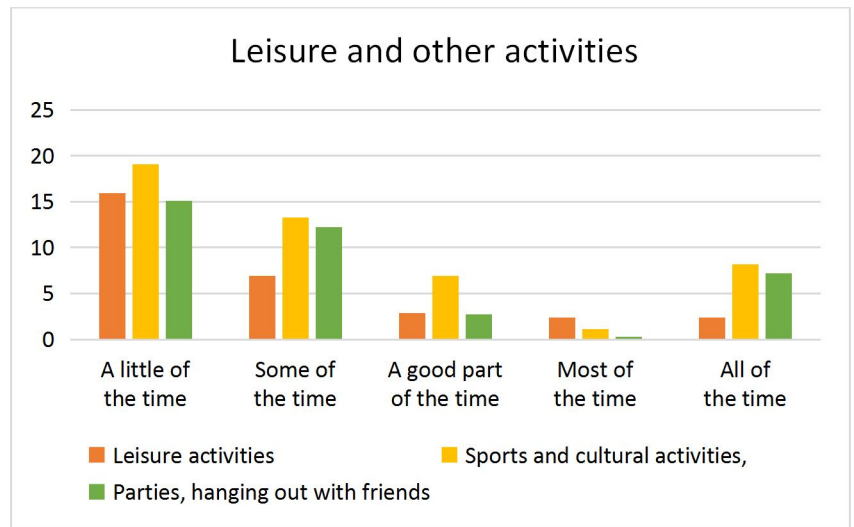


Figure 27: Worry about leisure related activities

7. FINANCIAL CIRCUMSTANCES

a. General

The COVID – 19 pandemics not only became a health crisis but an economic crisis as considerable setbacks took place globally, even affecting the economically stable nations. Sri Lanka immediately experienced the economic

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impact of the pandemic as it is a developing country that depends on industries such as tourism for a substantial level of income. Tourism was a key sector that was put on hold in the face of the pandemic.

Based on their knowledge, participants of the study were asked to take into account their family total monthly disposable income before the COVID – 19 pandemic and compare it with their income after the COVID – 19 pandemic and determine how manageable were the overall costs of their family.

It was identified that prior to the pandemic, 33.7% of the participants managed the overall cost of their families quite easily. However, in the post COVID – 19 period, this was done with great difficulty for 35.3% of the population.

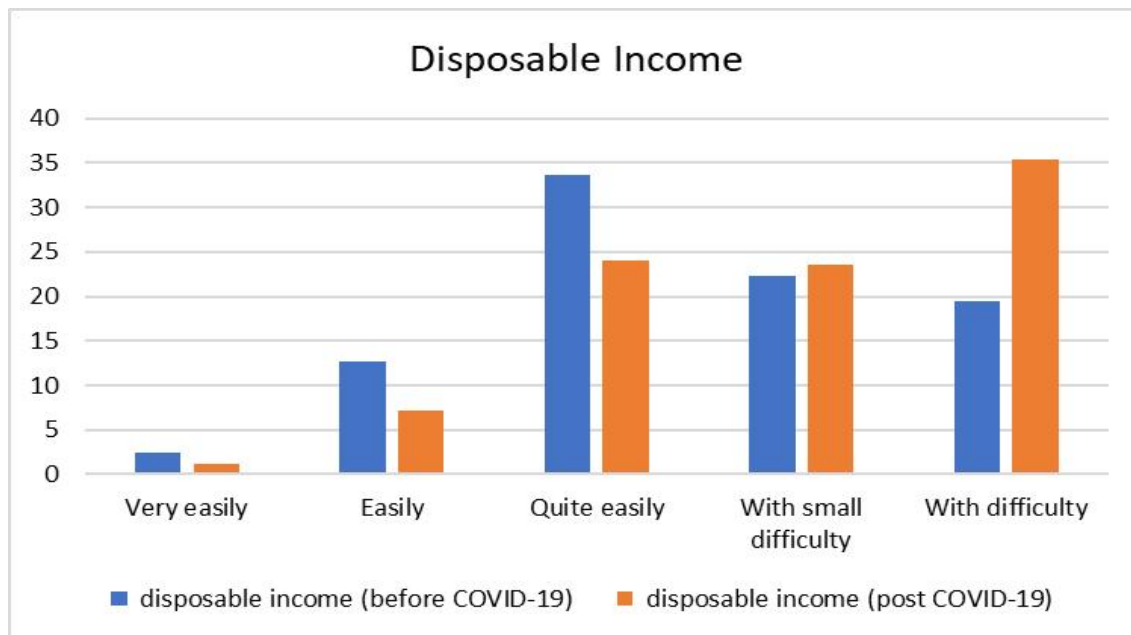


Figure 28: Disposable income

b. Loans

When participants were asked whether they had taken any loans during this period, 46.9% stated “Yes” and 43.8% stated they had not taken any loans. Others had left the question unanswered. Amongst those who confirmed that they had taken loans, several diverse reasons were given for taking loans.

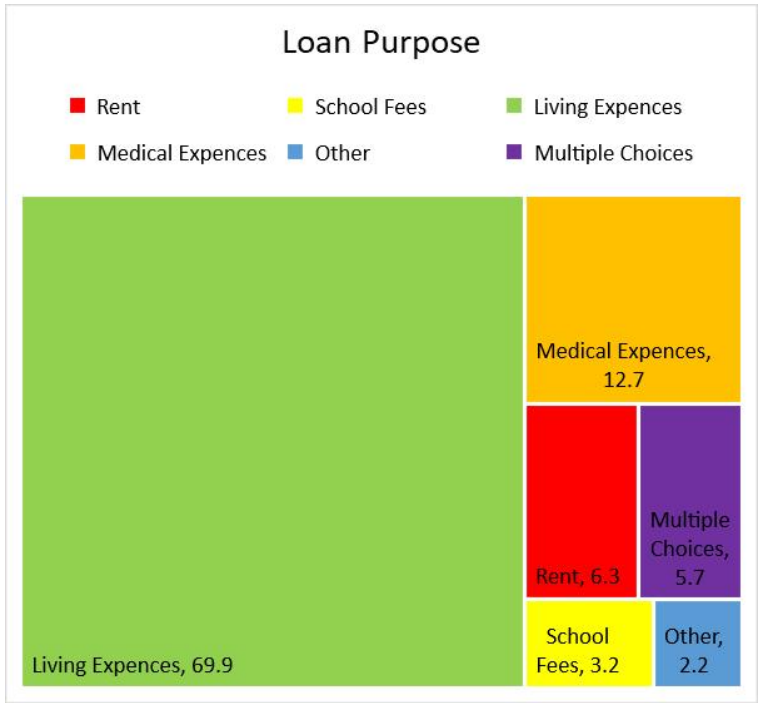


Figure 29: Loan Purpose

Most common reasons for loans for most of the participants (almost 70%) was to manage living expenses followed by medical expenses (12.7%).

Other reasons included paying for rent and for school fees.

5.7% of the participants indicated the loans were taken for multiple reasons

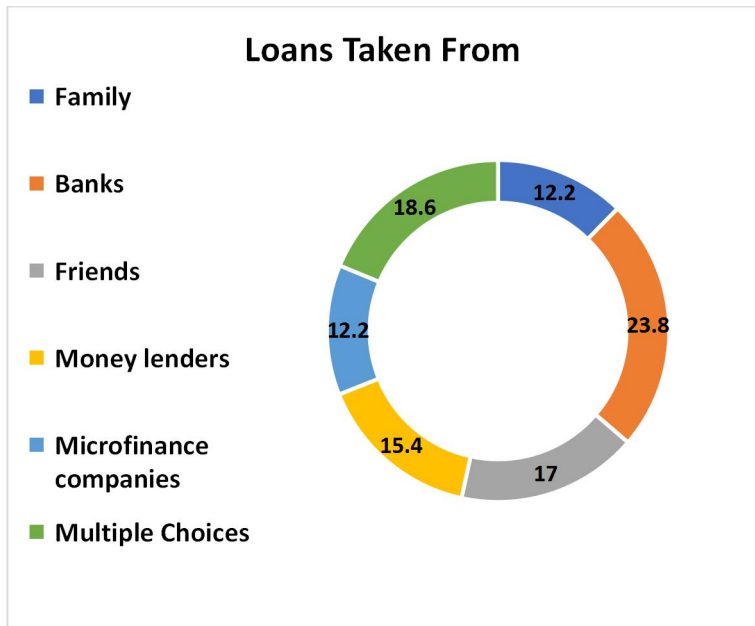


Figure 30: Loan lenders

Participants stated that banks were the main source for their loans (23.8%) followed by friends (17%) and independent money lenders (15.4%)

Taking a loan from a family member and microfinance companies tallied at 12.2%

However, 18.6% of the time participants indicated having taken a loan from multiple places. Some had made comments on taking loans from “Samurghi”

c. Education expenses

The pandemic affected the education sector by increasing the need for resources to conduct and participate in online classes and additional resources to conduct onsite (physical) classes to maintain social distancing. These additional and unexpected costs had to be borne by the educators and the parents of students. Thus, status of participants’ children’s educational expenses during the pandemic both school fees and tuition fees were part of the questionnaire, and it was discovered that for most parts the school fees remained the same despite the changes.

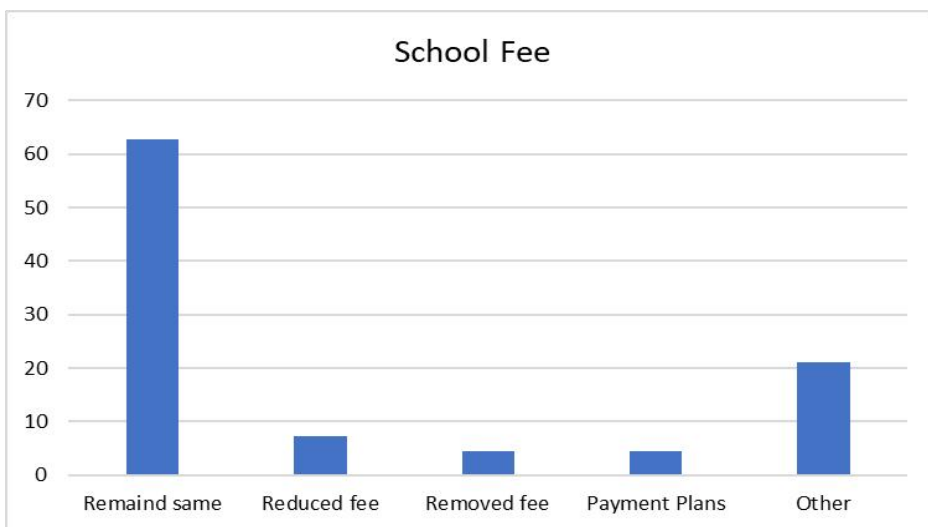


Figure 31: School fees

Some had noted that although schools were closed during the pandemic period, school fees and tuition fees remained the same. However, responses indicated that varied actions were taken by tuition classes such as increasing fees, reducing, and removing tuition fees and introducing payment plans. Some respondents selected the option ‘other’ with an explanation that they did not have tuition classes during this period.

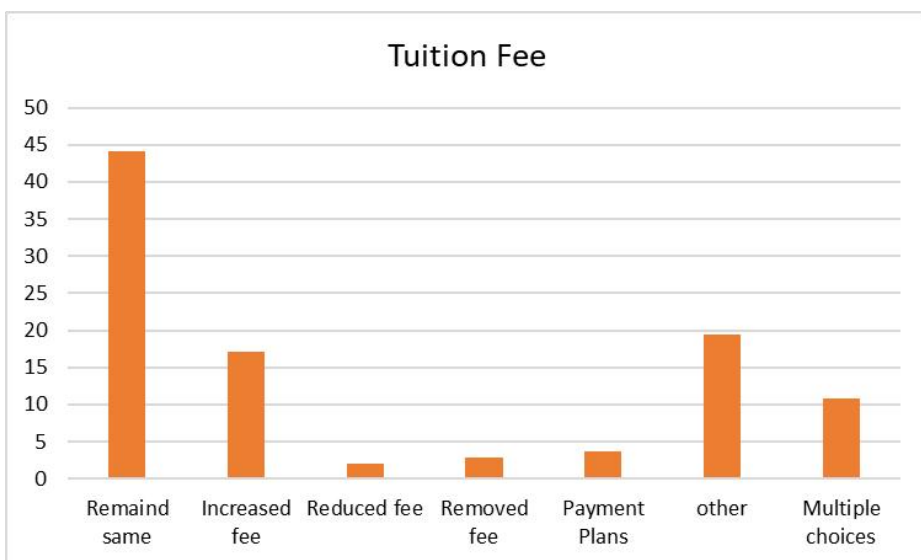


Figure 32: Tuition fees

d. Ability to buy essentials

The ability to buy essentials such as food and medicine since the pandemic was explored and it was identified that participants **often** worried that they would run out of medicine before receiving money to buy them. The least number of worries were on running out of food before receiving more money to buy them.

Concerns on the food and medicine that were bought not lasting and not having to buy more of the same were mostly considered to be worries that occurred sometimes.

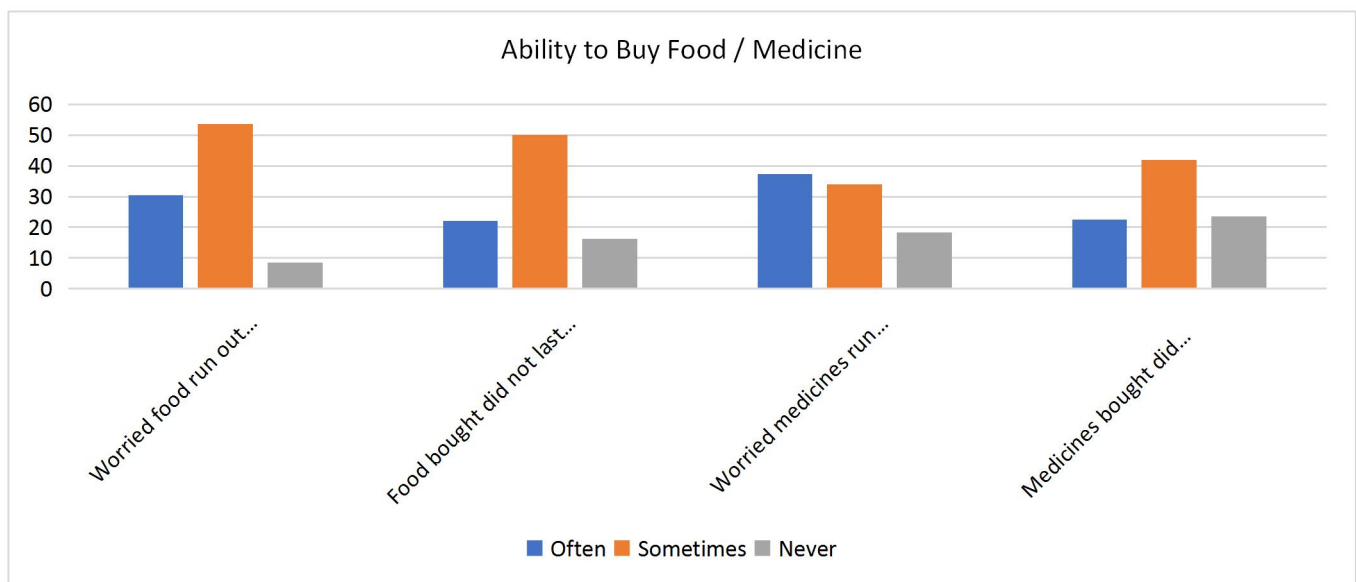


Figure 33: Worry about ability to purchase Food and Medicine

8. ACCESS TO SUPPORT

Government institutes, NGOs, private sector organizations have reached out to support communities to help them battle the challenges of the pandemic. For instance, they have provided financial support to those whose employment has been affected, educational support for students and/or provided essentials to households.

Participants were given the opportunity to compare the extent of their access to receiving support from each of these sectors.

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While the majority had noted having no access to government, NGO, private sector support separately or in combination, from those who noted as yes, the most common support they received was from the government sector (35%) followed by NGO (22.8%) and private sector (22%). Access to support from multiple sectors were received by 29.4% of the responders.

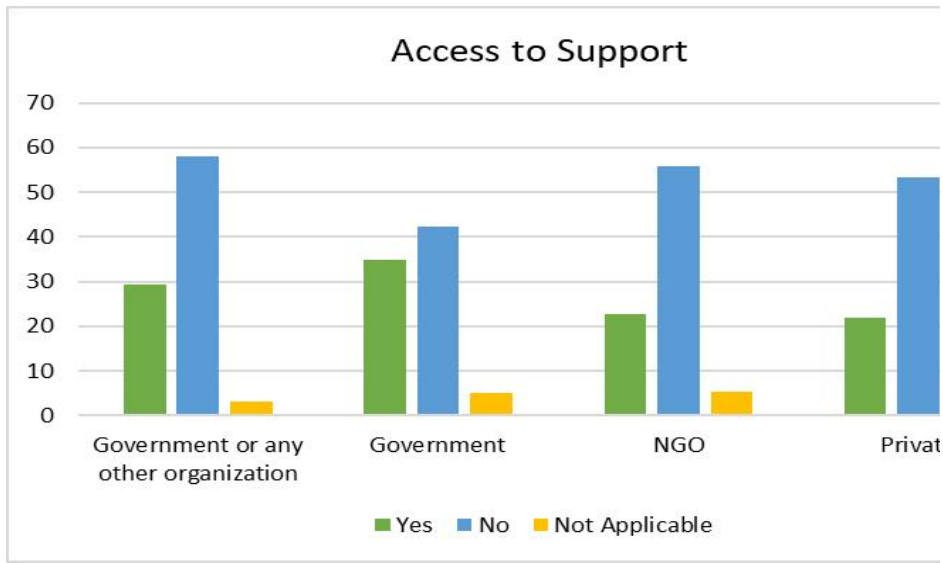


Figure 34: Access to support

9. COVID-19 AWARENESS AND KNOWLEDGE

It was important for researchers to identify the level of awareness and knowledge the participants had regarding the COVID – 19 pandemic and how successful this has been on a public /community level.

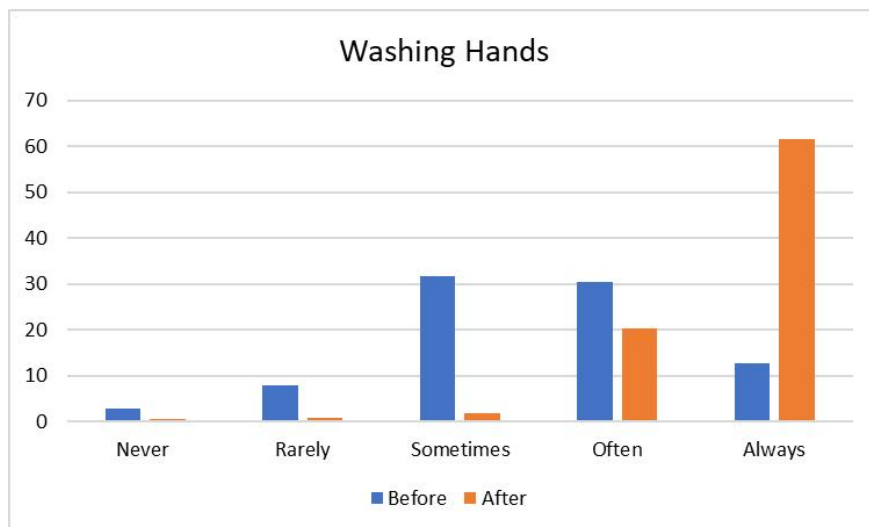
Participants were asked whether their families received any public health awareness about Covid-19 and 68.2% of the participants answered yes, with only 20.7% stating that they were not exposed to such awareness programs.

Furthermore, participants were also asked whether there were community imposed preventive measures associated with Covid-19. 62.1% respondents stated that there were community imposed preventative measures while 22% stated 'no'.

Although for both the questions a majority had stated yes, the percentage of those who said No, being above 20% should be considered as a great concern, given the seriousness of the situation.

10. SUPPORT MEASURES AND BEHAVIOUR

Since the pandemic, many of our behaviours were changed as new practices and supportive measures were incorporated to our daily routine as we followed the guidelines to fight against COVID - 19 while some previous practices were altered. Participants were asked with a series of questions on practices and behaviours / habits and were asked to assess the frequency of engagement (rated from never to always) comparing their behaviours and practices before and after the COVID-19 pandemic.



Washing hands, a vital practice to follow to protect against the virus saw a rapid increase post COVID where participants stated that over 60% of the time, they always washed their hands. Previously they were most likely to do so only sometimes.

Figure 35: Washing hands

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Wearing a mask as a daily part of our life was a novel habit introduced to many. Since the pandemic close to 60% of the participants always wore a mask whereas before the pandemic this habit was almost never practised.

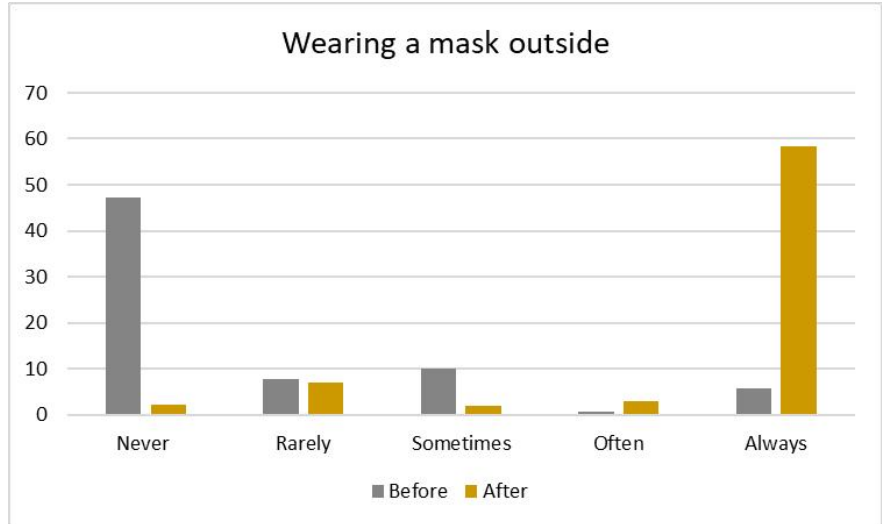
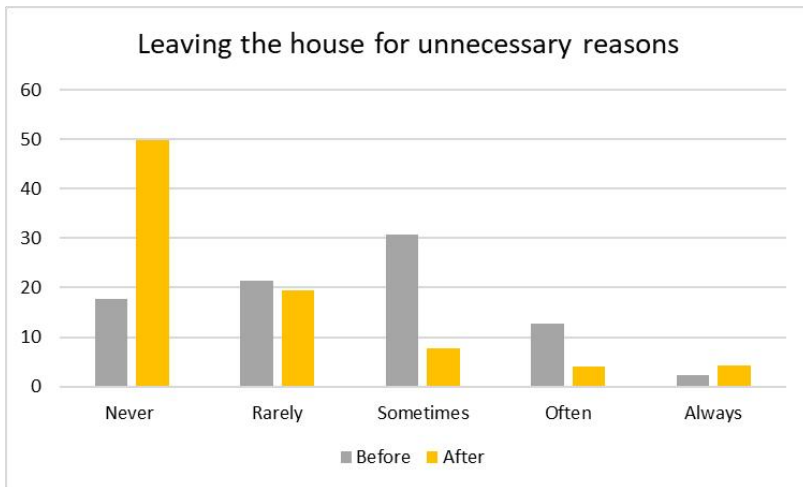


Figure 36: Wearing masks when outside



Leaving the house for unnecessary reasons were limited since the pandemic and the majority stated they never did so. However, prior to the pandemic, participants noted that they sometimes left the house for unnecessary reasons.

Figure 37: Leave house unnecessarily

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COVID – 19 being a socially communicable diseases, it is always advised to avoid crowds and large gatherings. Since the pandemic this behaviour has taken place in most participants' lives whereas previously sometimes, they would do otherwise.

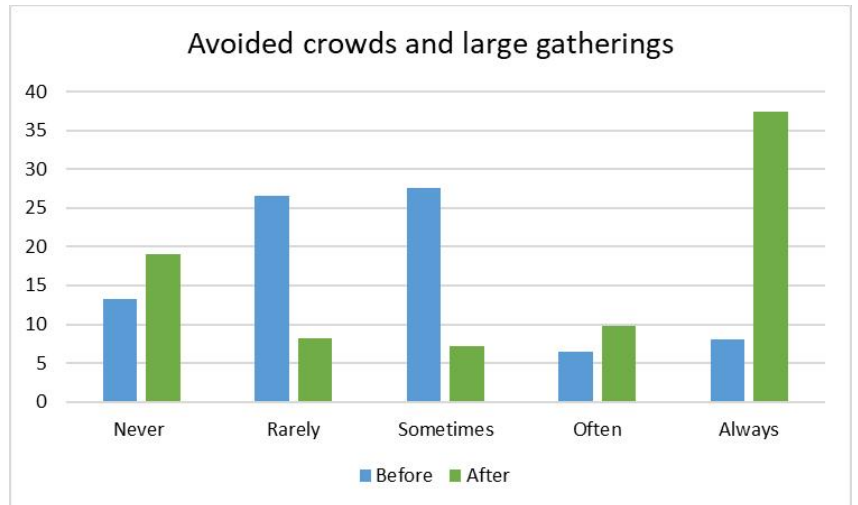


Figure 38: Avoid crowds and large gatherings

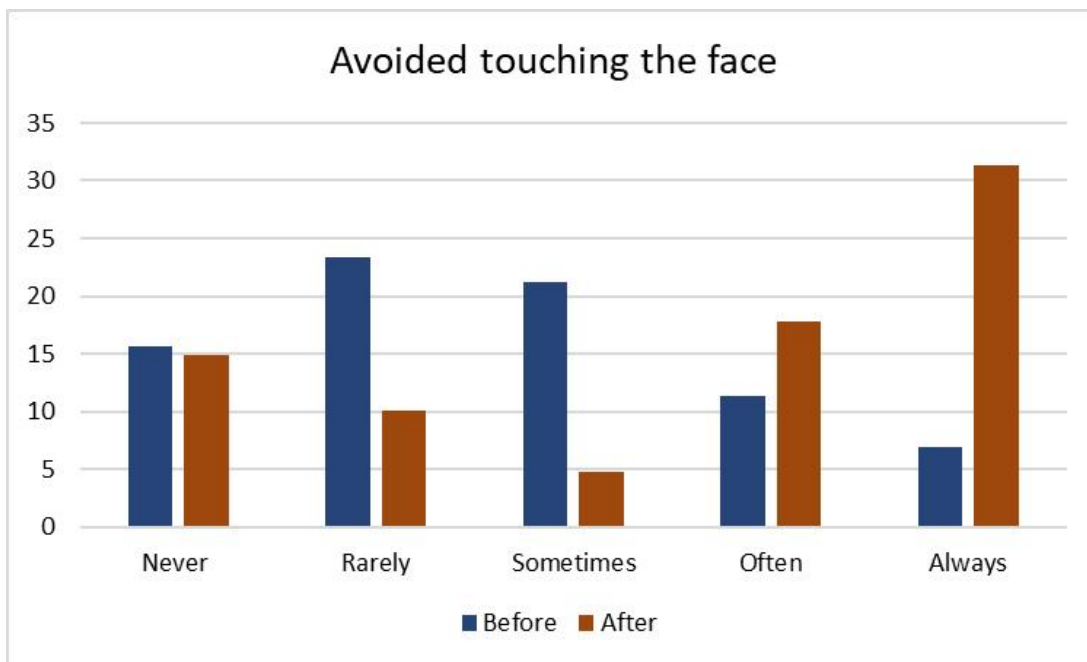
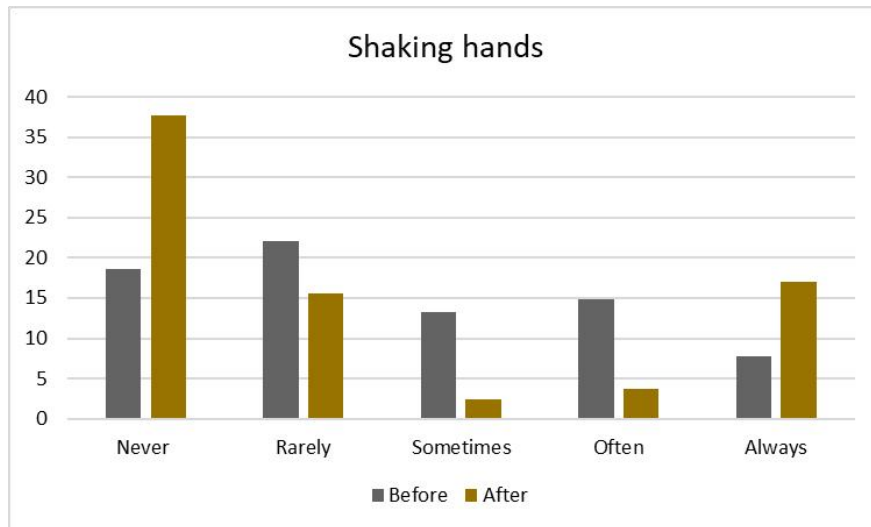


Figure 39: Avoided touching the face

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Apart from washing one’s hands thoroughly and wearing a mask, it is also important that we avoid touching our face to limit exposure to the virus. This behaviour, to consciously be aware of, and avoid touching the face takes place always for a majority of participants. Prior to the pandemic, this was otherwise a rare habit.



Shaking hands was strongly discouraged and new social norms such as “elbow bumping” was introduced to our cultures to limit being exposed to the virus. A significant majority stated that hand shaking did not take place among many after the

Figure 40: Shaking hands

Due to prolonged lockdown periods, most people stocked up on medicine and food during the pandemic. Prior to the pandemic, stocking up on medicines and food was generally a rare to occasional practice.

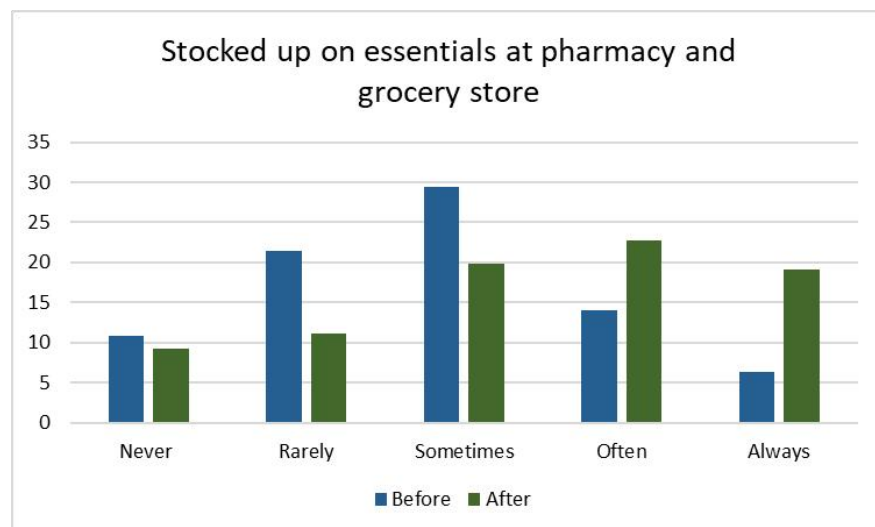


Figure 41: Stock essential items

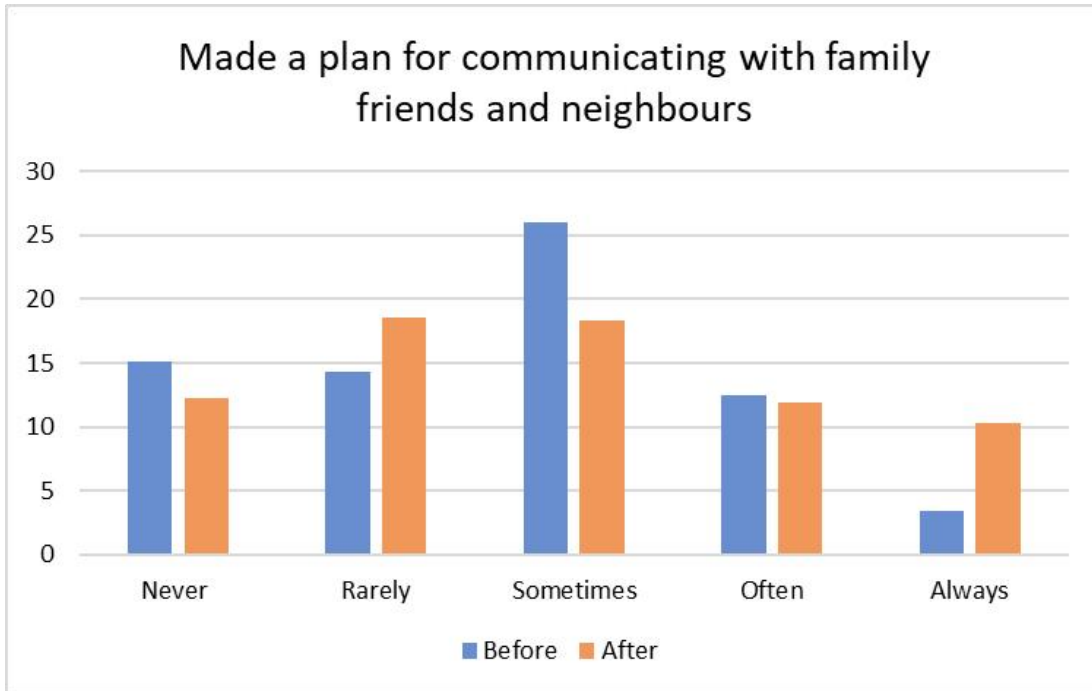


Figure 42: Maintaining communication

Making plans to be in communication with noted social groups – this question yielded mixed results. Before and after the pandemic it was observed that this was only done sometimes. However, there was a marked difference among the respondents who opted to communicate always. After the pandemic, this group’s interactions had increased from less than 5% to approximately 10%.

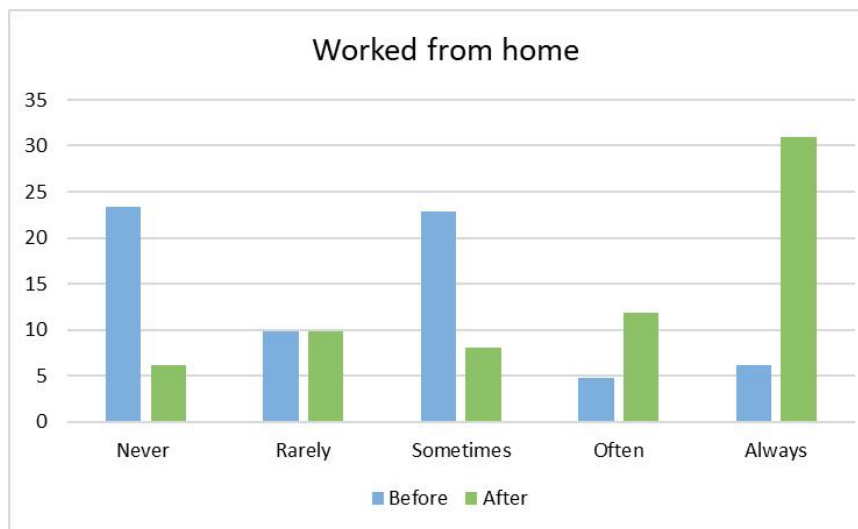


Figure 43: Work from home

With the pandemic, working from home became routine but it was a novel experience for many. The majority (over 30%) still continue to do so based on their industry. However, such practices were almost never part of the participants lives or it was not a common occurrence.

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Many had cancelled their travel plans post pandemic. Such practices were mostly observed occasionally before. Cancelling travel plans is likely to have been to avoid exposure to large crowds, to avoid public transportation and to reduce family visitations.



Figure 45: Avoided public transport

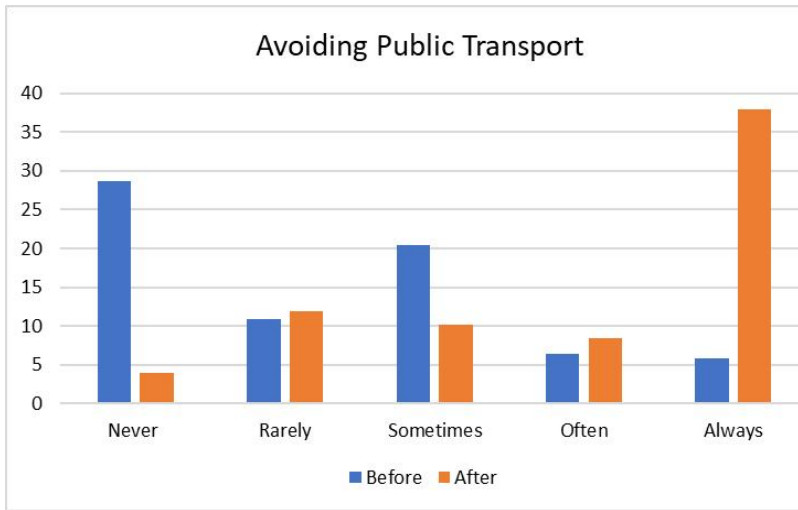


Figure 44: Cancelled travel

Similar to avoiding large crowds due to the high possibility of becoming exposed to the virus, public transportation was also avoided by a significant number of participants (close to 40%) at all times, possibly moving to a different mode of transportation or to the practice of working from home. Previously, this was never an issue. previously.

Online grocery shopping which has not been a common practice saw a slight increase post pandemic. However, considering the availability of such resources and skills to navigate the technology, many still preferred

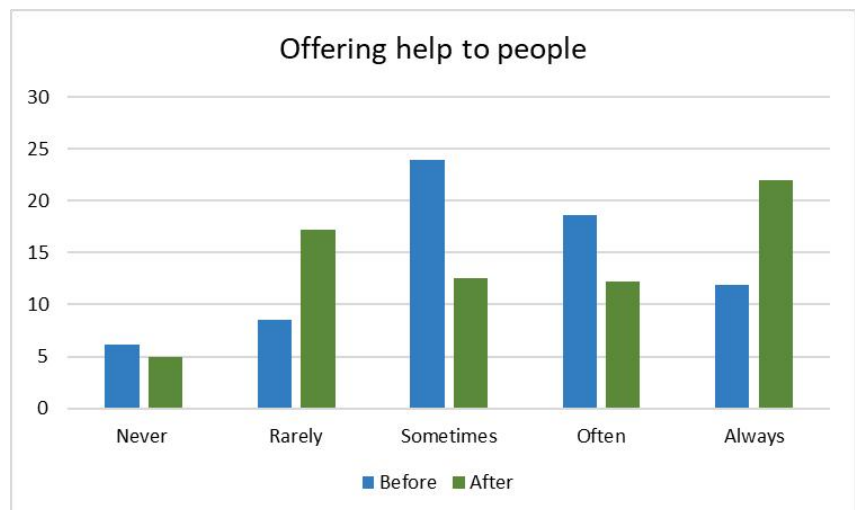


Figure 46: Offer help to others



Figure 47: On-line Grocery shopping

It is observed that social behaviours such as offering help to people increased since the pandemic and it is likely that the social support and community togetherness was a vital part of facing the pandemic especially in its early stages

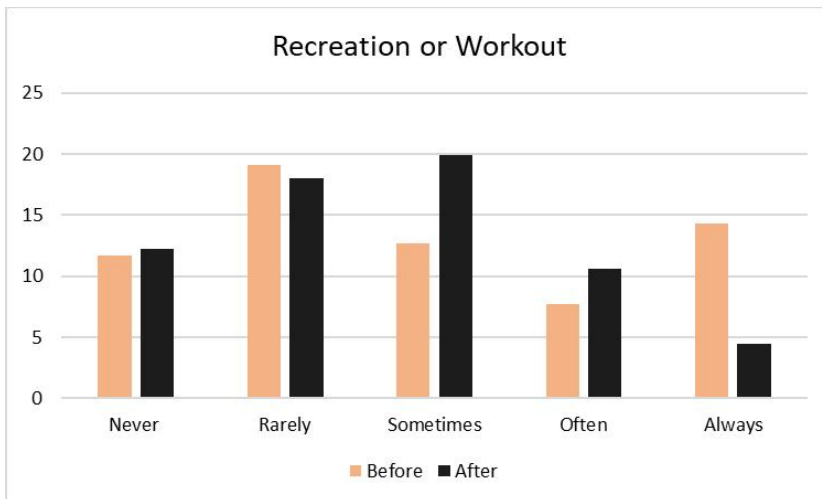


Figure 48: Recreation or workout activities

Interestingly, recreational activities or engaging in workouts had increased since the pandemic which was a rare practice earlier. Change could be possibly due to prolonged periods of lockdown and long stays at home where participants were able to take a step back and engage in such activities.

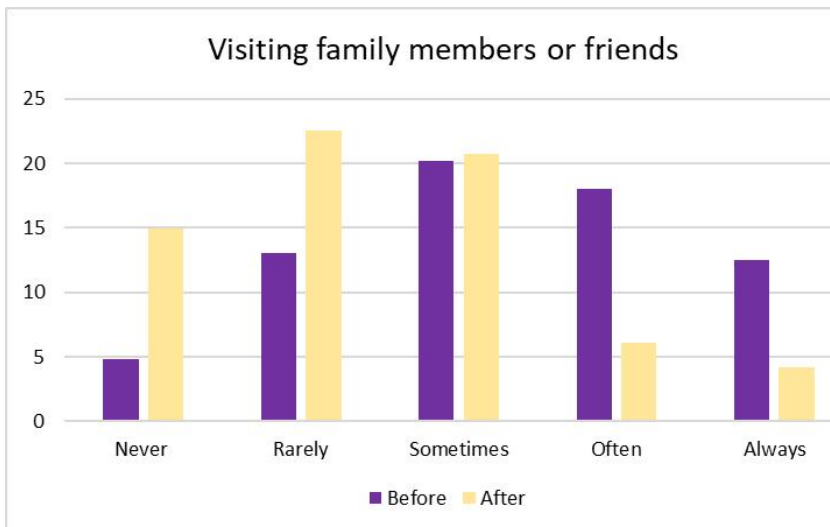


Figure 49: Visiting family and friends

Visiting family members or friends that took place sometimes too often in life, became a rare occurrence since the pandemic and this could be due to numerous reasons such as lockdown periods, quarantine period, social distancing etc.

11. COVID – 19 EXPOSURE AND VACCINATION

Due to the widespread outbreak of the virus, participants were asked questions regarding their exposure to COVID – 19 and their views about the vaccinations to combat the deadly virus.

8.8% of the participants have noted that they had been infected by the COVID-19 virus, 67.9% stated that they were certain that they had not been infected by the same. Interestingly a significant number of participants (15.6%) noted they had no idea of the possibility of being infected or not infected by the virus.

Access to PCR tests conducted with no cost required long waiting lines, and paid tests were not accessible financially by everyone in the population. Thus, it is safe to conclude that even with possible symptoms, not all participants may have recourse to or any interest to get themselves tested.

COVID -19, being a socially communicable disease requires a period of being in quarantine once confirmed to have been infected or exposed to the virus. Participants were asked whether they had been in contact with a COVID patient. 12.2% of the participants stated yes, with 61.8% stating no. 17.5% of the participants noted that they were uncertain on their status of exposure.

When asked whether they have a close family member who contracted the virus, 18.6% said they did, 72.4% stated no and 0.3% of the participants indicated that they were not aware of such a situation.

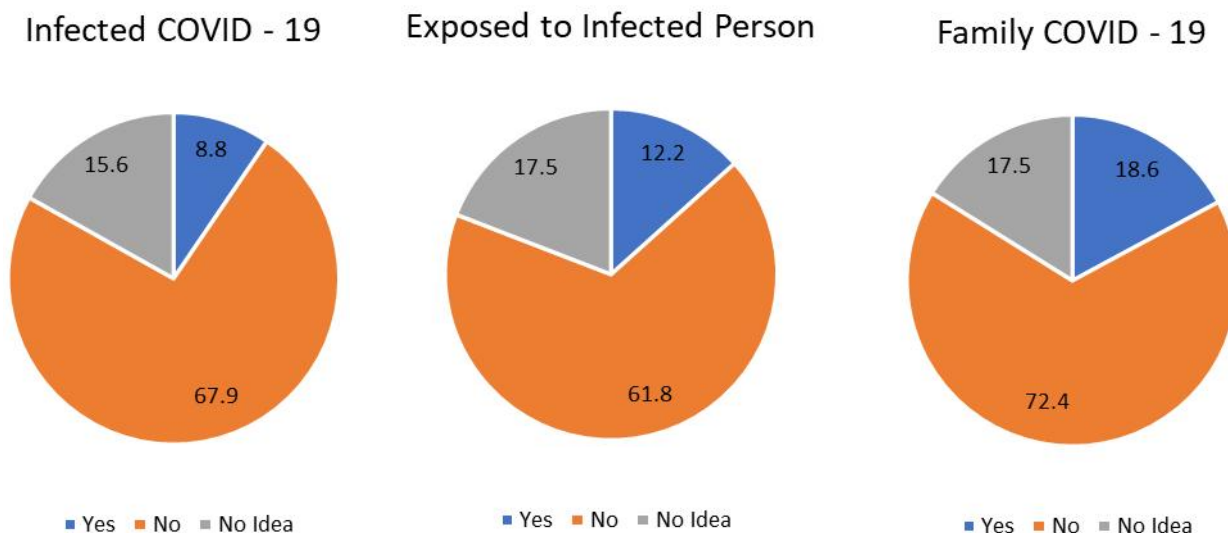


Figure 50: COVID-19 exposure

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Being exposed to the virus or hearing that a close family member has been diagnosed with the virus or even the possibility of being exposed to a person who had contracted the virus can be distressing news. Taking this into consideration, participants were asked about their immediate reactions to the news, or the experiences noted above.

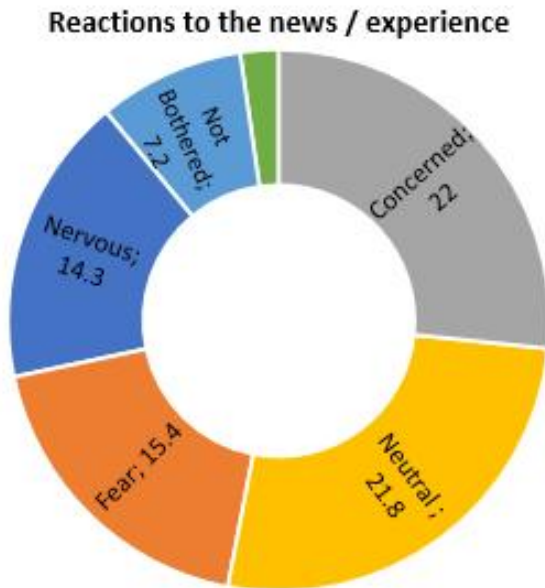


Figure 51: Reactions to news/experiences

Majority of the participants were concerned (22%). However, this was followed by a similar percentage of those who stated they had no reactions to the news or the experience (21.8%). Fear (15.4%) and nervousness (14.3%) were common responses identified (while interestingly 7.2% were not concerned and had no reaction).

Public health measures to slow or stop the spread of the virus have been in place since the recognition of the threat. They included measures to change certain behaviours such as requiring people to wash hands and wear a mask. Researchers introduced the vaccine within the first year of the pandemic and it is considered an effective tool against the pandemic. While following behavioural guidelines reduces the possibility of contracting the virus, being vaccinated is a preventive tool against becoming seriously ill or dying after contracting the virus.

Participants were asked: when considering the current situation, if the vaccination was made available, are likely were they to take it. Only 27.9% stated that they would take the vaccination, 15.1% of the participants said no. Some participants were uncertain about accepting the vaccine and 15.4% responded saying “Maybe” and 17% stated they had no idea.

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When participants were asked how confident they were that they will be vaccinated soon, a majority (40.8%) said they were confident while 12.7% indicated no confidence on the same. Some participants were uncertain where another 12.7% stated as maybe and 9.8% noted not having an idea about the potential vaccination.

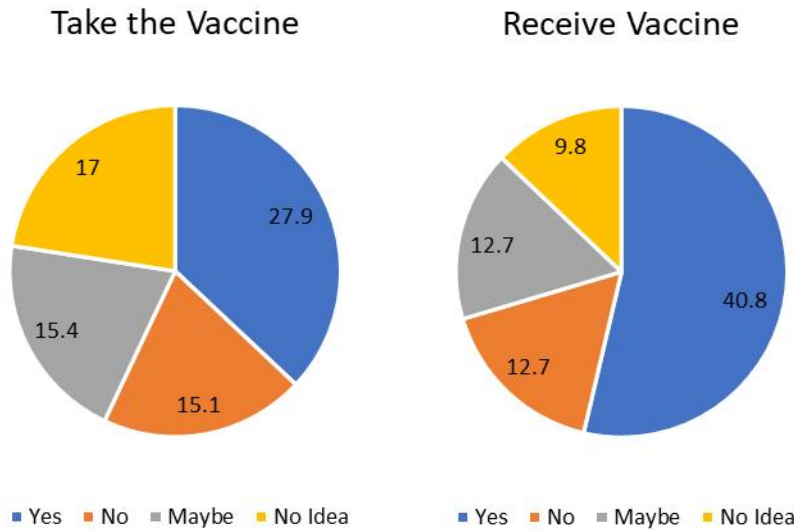


Figure 52: Vaccination status

On 7th of March 2021 Sri Lanka received its first batch of vaccinations from the COVAX facility and almost a year later, 64.5% have been vaccinated.



Source: Official data collated by Our World in Data
 Note: Alternative definitions of a full vaccination, e.g. having been infected with SARS-CoV-2 and having 1 dose of a 2-dose protocol, are ignored to maximize comparability between countries.

CC BY

Figure 53: Coronavirus (COVID-19) Vaccinations, 2021

12. GENERAL REFLECTIONS

All participants were asked about their general reflections on how confident they were about recovering from the consequences after the pandemic. Many of the participants felt neutral about recovering financially from the disruption caused by the pandemic as the financial situation is still in a state of uncertainty. However, there was also a majority vote on the confidence against the financial situation. Similar views were shared related to career and educational prospects. However, with regard to relationship, while majority still stayed neutral, there were many who believed that their relationships have been affected by the pandemic and that the recovery of relationships, post pandemic were affected.

Participants were asked to share any comment on their general views or the reflections of the pandemic as a final thought and analysing qualitative the data gathered from over 120 participants, some common themes were identified and are noted below.

Participants noted the importance of following the guidance to overcome the pandemic and that it is our responsibility to do so. Some participants noted that those who do not follow the guidelines are being selfish.

Many observed that the current status of the world created an uncertainty about life that not only affected the health sector but careers and education as well as social lives. Many also noted that we must accept the COVID – 19 viruses, just as any other disease and learn to live with it.

Many noted that their entire careers collapsed and their goals shattered. The psychological and social impact noted were loneliness, stress, fear, loss of hope and the shattered goals. Some even noted that the situation was such that it caused them a mental paralysis, and it was even difficult to begin thinking about what to do next.

Fears and doubts were shared on when or whether the virus will ever leave us while some showed signs of wishful thinking and hopes that if we are to follow the guidelines, we will defeat the pandemic.

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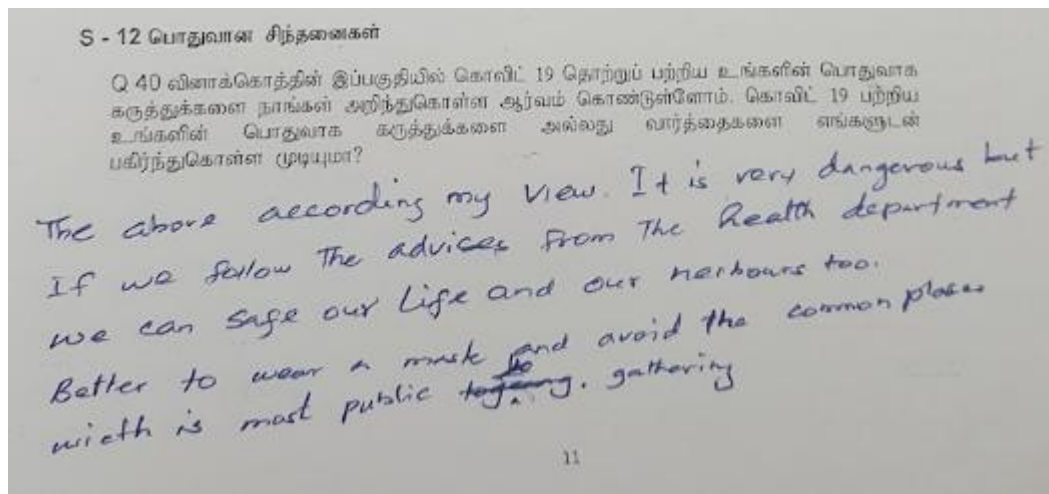
However, despite some comments indicating the negative consequences of the pandemic, it was interesting to note some positive comments that are highlighted below.

“Since the pandemic, we have become more attentive to our physical health and there have been positive changes in our personal behaviour such as washing our hands and being more mindful of cleanliness along with some evidence that the country too seems to have become cleaner.”

The pandemic has also redirected our attention to more important aspects of our lives... things that were previously ignored or taken for granted such as health, time with family.

We must not stigmatize those who have been affected by the virus. A common theme was the focus on the family. Participants made the comments outlined below on the family.

The pandemic created the opportunity to plan the future and spend time with the family for some. However, for those in the line of work directly associated with eradicating the virus, they had to spend long periods of time away from the family due to work. It was noted that this period has been a time where people needed and appreciated the value of family support.



CONCLUSION

The survey was distributed to approximately 400 participants and the team has successfully collected data on the impact of COVID – 19 pandemic on the lives of people. For the selected sample, the impact of COVID – 19 on the employment had a marginal impact. However, these results may significantly differ from another study that my focus on another sample which maybe either larger in size or included those employed in different sectors. Furthermore, many began to work from home and have subjectively stated there was an increase in their performance.

In exploring their social life, it was noted that the participants are primarily in contact with close family members on a daily basis and are likely to reach out to them as well as friends for any help or share any worries.

Finances have been a major concern observed in the survey amongst participants where many struggle to manage with family expenses in the aftermath of the pandemic, and many had taken loans to support their living expenses. During this crisis while those who noted that they received support from other institutions to survive the pandemic, noted that the government support was the most accessible. However, a worryingly high number noted that have not received any form of support. Furthermore, the community level measures or public awareness to manage the pandemic had not reached out to 1/5 of the population and these figures indicate a gap in both communications and connectivity.

It was observed that many of our behaviours had changed with the incorporation of new habits and the shedding of some previous practices to respond to the health and safety guidelines of the COVID – 19. The importance of following these instructions as responsible citizens were further highlighted by the participants in their general comments. Hence the pandemic brought about some positive behavioural changes.

The purposes of the survey were to engage with citizens and gather information on their experiences, both positive and negative experiences during the pandemic. It provided insights of their struggles and challenges and their resilience. This information, when used intelligently can support the framing of public policies that are

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responsive to community needs. During the pandemic, when it was not possible to get together with people and learn of their experiences, the survey provided a window of opportunity to give them a voice and to hear their stories.

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