Listening to Young Lives at Work in Peru: Fifth Call

Introduction

Following a devastating second wave of the pandemic between January and July 2021, Peru continues to have the highest rate of death from COVID-19 in the world. The national vaccination programme accelerated in the second half of 2021, with 65 per cent of the total population fully vaccinated by the end of the year.[1] The arrival of the highly transmissible Omicron variant has hastened the recent introduction of booster doses for those over 18 years old, with 5–11 year olds also now eligible for vaccinations.

After a dramatic fall in GDP of 11 per cent in 2020, following the extended national lockdown, a subsequent economic recovery led to expected GDP growth of 13.2 per cent for 2021, according to the Central Reserve Bank of Peru (2021). Most economic and social restrictions have now been relaxed, though limits on the number of people allowed in closed spaces remained until the end of February, following the arrival of Omicron, with proof of vaccination still required in most shops, restaurants and banks. Employment levels, which were slow to recover in the second half of 2020, showed improvement in 2021.

Schools and higher education institutions which largely remained closed throughout the pandemic, are still providing lessons remotely, though this is expected to change in the new academic year. Interrupted education is likely to have long-lasting impacts on skills development and job opportunities, particularly for the most vulnerable groups, further increasing persistent inequalities.

Overall poverty rates increased dramatically to 30 per cent in 2020, compared to 20 per cent in 2019, according to the Peru National Institute of Statistics and Information (2021). Targeted government interventions

1 Data from Our World in Data, accessed 18 January 2022.

HEADLINES: FIFTH CALL

1. Despite the acceleration of the vaccination programme, significant vaccine inequalities were identified, with those living in the poorest households least likely to be vaccinated (54 per cent, compared to 72 per cent in better-off households). Those living in rural areas and whose mother tongue is not Spanish were also less likely to be vaccinated.
2. Encouragingly, there was little vaccine hesitancy, with almost all respondents (93 per cent) reporting that they would get a vaccine if available. Access to testing also appears to be high, although affordability in urban areas and long travel distances in rural areas were stated as obstacles for those unable to get tested.
3. Of those enrolled in education since the start of 2020, 23 per cent of 19–20 year olds had left education by October–December 2021. While a small proportion had left due to completing their course, the majority had dropped out due to affordability, lack of IT equipment, the cancellation of classes, or the need to look for work. Among those who continued their education, over half (51 per cent) reported that the quality of teaching was worse than before the pandemic.
4. A growing digital divide is limiting young people's chances of a successful education and widening persistent inequalities. More than 1 in 3 (35 per cent) of 19–20 year olds who had no digital access had left education by October–December 2021, compared to only 10 per cent of those with access.
5. Recovery in employment levels following lockdown has remained uneven, with levels recovering in full for young men but only partially for young women, leading to a significant widening of the gender employment gap among 26–27 year olds: from 11 percentage points in the pre-pandemic period to 24 percentage points in October–December 2021.
6. There has been a substantial decrease in perceived household wealth, with evidence of deep pockets of poverty exacerbated by growing inequalities. Of particular concern, those whose mother tongue is not Spanish reported a significant increase in the proportion living in poor or destitute households, from 12 per cent before the pandemic to 20 per cent by October–December 2021 (compared to only 4 per cent for those whose first language is Spanish).
7. Mild food insecurity has become more widespread since the end of 2020, increasing from 54 per cent to 63 per cent by the end of 2021, but there has been an encouraging decrease in severe food insecurity, from 9 per cent to 5 per cent, over the same period.
8. The prevalence of mental health issues remains very high among young people, with 24 per cent reporting symptoms of depression (compared to 25 per cent in 2020), and 30 per cent reporting symptoms of anxiety (compared to 31 per cent in 2020).

were introduced in 2021 to alleviate hardship for families living in poverty, such as the *Peru Trabaja* programme (Peru Works) and the emergency cash transfer scheme *Yanapay Peru* (Help Peru), though the effectiveness of these schemes appears limited based on existing evidence (Curi-Quinto et al. 2021).

The political situation remains unstable. The new government led by President Pedro Castillo took up office in July 2021 after winning by a narrow margin, and lacking a majority in congress. Over the last six months, there have been four different prime ministers and numerous Cabinet changes, including three different education ministers. This has created great uncertainty about the orientation of future policies.

Earlier Young Lives research in Peru showed that widening inequalities and adverse economic and social impacts of the pandemic could derail progress towards the Sustainable Development Goals (SDGs). In particular, the combined pressures of interrupted education, widespread stresses on household finances, food insecurity and a rise in the burden of mental health following the first wave in 2020, had a profound effect on young people from poor socio-economic backgrounds, with a disproportionate impact on young women.

This report summarises the ongoing impact of the COVID-19 pandemic on the education, employment, food security and mental health of Young Lives respondents in Peru, tracked since 2001, and now 19–20 and 26–27 years old. Our findings are based on a preliminary version of the data collected during the fifth call of the Young Lives phone survey, conducted between October and December 2021.

Methods

The fifth call of the Young Lives phone survey took place between 7 October and 15 December 2021, following a shorter fourth survey call conducted between 4 August and 5 September 2021. A total of 2,178 young people were contacted: 1,664 from the Younger Cohort (aged between 19 and 20 years) and 514 from the Older Cohort (aged between 26 and 27 years). This corresponds to 86 per cent of the sample interviewed in the last face-to-face Young Lives survey in 2016.[2]

The Young Lives sample has national coverage and includes urban and rural areas. In the analysis below, respondents from both age cohorts are merged into one sample, unless otherwise stated. Our analysis is designed to assess how the impact of COVID-19 is affecting individuals with different socio-economic backgrounds and histories, and is informed by data collected from previous calls in our phone survey, alongside longitudinal data collected since 2001 through regular in-person surveys.

Results

1. The impact of COVID-19 on health

COVID-19 infections and testing

By October–December 2021, 47 per cent of Young Lives respondents believed that at least one member of their household had been infected since the virus outbreak in 2020, a figure which has more than tripled since August–October 2020 (13 per cent), reflecting the devastating impact of the second wave in 2021. Those living in urban areas reported the highest level of suspected infections (51 per cent, compared to 31 per cent in rural areas), though there has also been a substantial increase for those living in rural areas (only 7 per cent were reported in August–October 2020).

Access to testing appears to be very high, with most young people (94 per cent) reporting that they would be able to get a COVID-19 test if needed. For the 6 per cent who believed they could not get a test, the most common reasons were related to affordability (particularly in urban areas) and because the test centres were too far away (particularly in rural areas). Overall, those living in rural areas were more likely to report they were unable to get tested (9 per cent), compared to those living in urban areas (5 per cent).

Vaccinations

There has been a substantial increase in vaccination coverage among respondents, with 62 per cent reporting they had received at least one vaccine dose by October–December 2021, compared to only 7 per cent in August 2021, reflecting the accelerated national programme during the second half of the year (Figure 1).

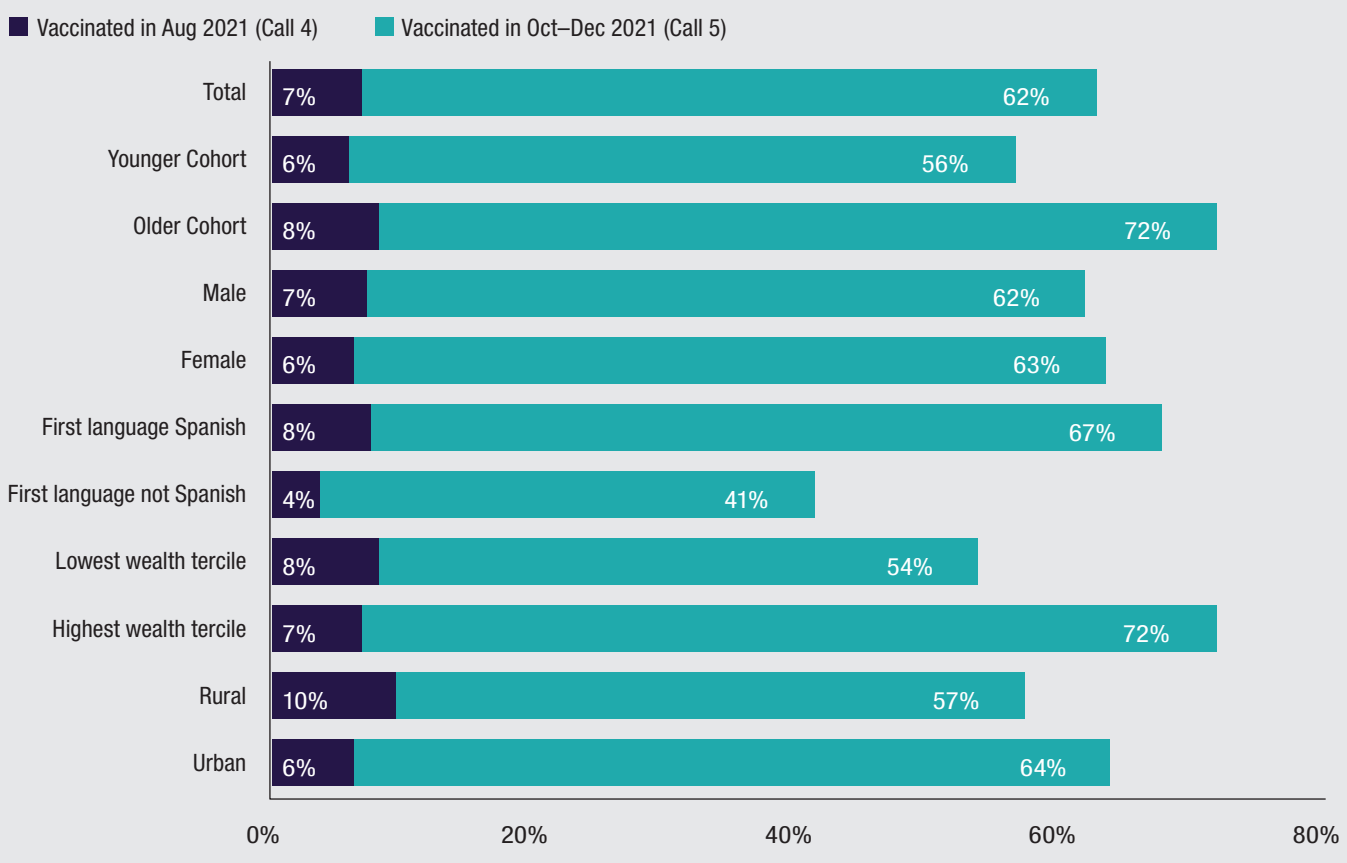
Despite the overall increase, our results show significant inequalities in vaccination rates, with a striking difference **between those living in better-off households (72 per cent) compared to those in the poorest households (54 per cent)**.[3] There are also significant differences between the vaccination rates of **those whose mother tongue is not Spanish (41 per cent), compared to those whose first language is Spanish (67 per cent).** Vaccination rates are also lower in rural areas (57 per cent) than urban areas (64 per cent).

While our results show significantly higher vaccination rates among 26–27 year olds, compared to 19–20 year olds, this may in part be related to the timing of interviews and vaccine eligibility (19–20 year olds only became eligible for vaccination in October 2021, when most survey interviews took place for this age group, whereas 26–27 year olds were eligible from September 2021 and were typically interviewed later).

2 In Call 5 we also administered two additional online surveys, for those with access to a smartphone and home internet, to collect information on: anthropometrics and food habits (these results will be analysed in a separate report as part of the SONGS project funded by PROCIENCIA, MRC, Newton Fund, and the British Embassy in Peru); and household-level GPS locations.

3 Relative household wealth is determined using the Young Lives wealth index measured during the Young Lives Round 5 survey, undertaken in 2015/16.

Figure 1: *Vaccination rates in August 2021 (Call 4) and October–December 2021 (Call 5)*



Note: Estimates use sampling weights.

Encouragingly, there was little reported vaccine hesitancy, with almost all respondents (93 per cent) stating they 'somewhat' or 'strongly' agreed that they would get a vaccine if available. Of the minority who disagreed, the most common reason was because of concerns over its safety and the potential for side effects.

2. The impact of COVID-19 on education

Despite the relaxation of some restrictions during 2021, **schools and higher education institutions have largely remained closed since the start of the pandemic,** and this continues to have a significant and unequal impact on education, particularly for students from poor households.

Our analysis of the impact of the pandemic on education focuses on the 60 per cent of the 19–20-year-old cohort who were enrolled in education at some point between the start of 2020 and the interview date in October–December 2021.

Enrolment and dropout

Of those enrolled in education since the start of 2020, 23 per cent of 19–20 year olds had left education by October–December 2021. Given their current age, some had left due to completing their course, but **19 per cent dropped out of education for other reasons.** A third of those who had dropped out had left due to an inability to pay tuition fees, with other common reasons being that they were unable to attend remote lessons due to a lack of equipment, the cancellation of classes, and the need to look for work.

A growing digital divide is limiting young people's chances of a successful education and widening persistent inequalities.[4] The likelihood of dropping out before course completion was significantly greater among those without access to the internet; more than 1 in 3 (35 per cent) of 19–20 year olds who had no digital access (via a computer, laptop or smartphone) had left education by October–December 2021, compared to only 10 per cent of those with access on at least one device.

Dropping out of education was also significantly more common among those whose mother tongue is not Spanish (25 per cent, compared to 18 per cent for first-language Spanish speakers), and among young men (24 per cent, compared to 14 per cent for young women).

Quality of education

Over half (51 per cent) of the 19–20-year-old students reported that the quality of teaching was worse than before the pandemic (22 per cent reported it was the same, 7 per cent reported an improvement, and 19 per cent were unable to make a comparison). With schools and universities remaining closed and teaching continuing to be provided through online lessons, it is unsurprising that many young people believed that the quality of education had declined.

4 The growing digital divide in the Young Lives countries was the subject of a recent blog.

3. The impact of COVID-19 on employment

The loss of work during the national lockdown in 2020 had a significant impact on both young men and young women, as shown in Figure 2, which focuses on the Older Cohort (26–27 year olds).[5]

Previous Young Lives findings showed a partial recovery in employment levels by the end of 2020, with evidence suggesting that the quality of jobs had deteriorated following the lifting of strict economic restrictions. Notably, 26–27-year-old women remained significantly behind pre-pandemic employment levels throughout 2020, with our analysis showing that the unequal burden of caring responsibilities for young women has directly contributed to gender disparities in employment recovery (Scott et al. 2021).

Gender employment gap

There has been a further widening of the gender employment gap throughout 2021, increasing from 11 percentage points at the start of the pandemic to 24 points by October–December 2021. Following their full recovery in employment by the end of 2020, 26–27-year-old men had maintained the same level by October–December 2021 (88 per cent, compared to a pre-pandemic employment level of 87 per cent), recovering from a modest decrease in March 2021 (84 per cent). By contrast, the employment level of 26–27-year-old women by October–December 2021 (64 per cent), was still 11 percentage points below its pre-pandemic level (76 per cent).

4. The impact of COVID-19 on household wealth and food security

Household wealth

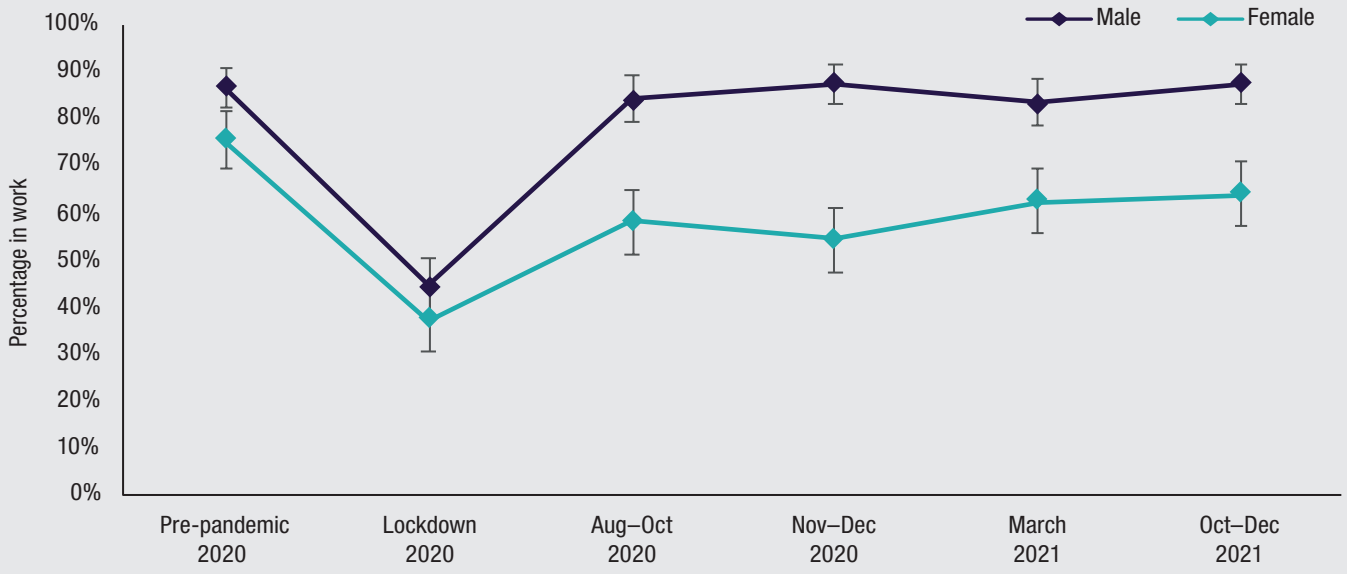
To investigate changes in perceived household wealth, we asked respondents to categorise the wealth status of their household into poor/destitute, struggling, comfortable, or rich/very rich; we compared responses with those obtained in August–October 2020 (as part of Call 2) and just before the pandemic (recalled during the Call 2 interview). Figure 3 shows how perceptions of household wealth have shifted over the course of 2020 and 2021.

There has been an overall increase in perceived levels of poverty and decreased subjective wealth since the start of the pandemic, with some signs of improvement since August–October 2020. The number of individuals who consider their household to be struggling or poor/destitute increased from 19 per cent before the pandemic, to 33 per cent in August–October 2020, with a modest reduction to 24 per cent by October–December 2021.

Our evidence shows pockets of deep poverty exacerbated by growing inequalities, with little evidence of recovery for households that were pushed into the bottom of the wealth distribution following the start of the pandemic in 2020, particularly among rural households.

Of particular concern, those whose mother tongue is not Spanish reported a significant increase in the proportion living in poor or destitute households, increasing from 12 per cent before the pandemic to 17 per cent by August–October 2020, with a *further* increase to 20 per cent by October–December 2021 (compared to only 4 per cent for first-language Spanish speakers).

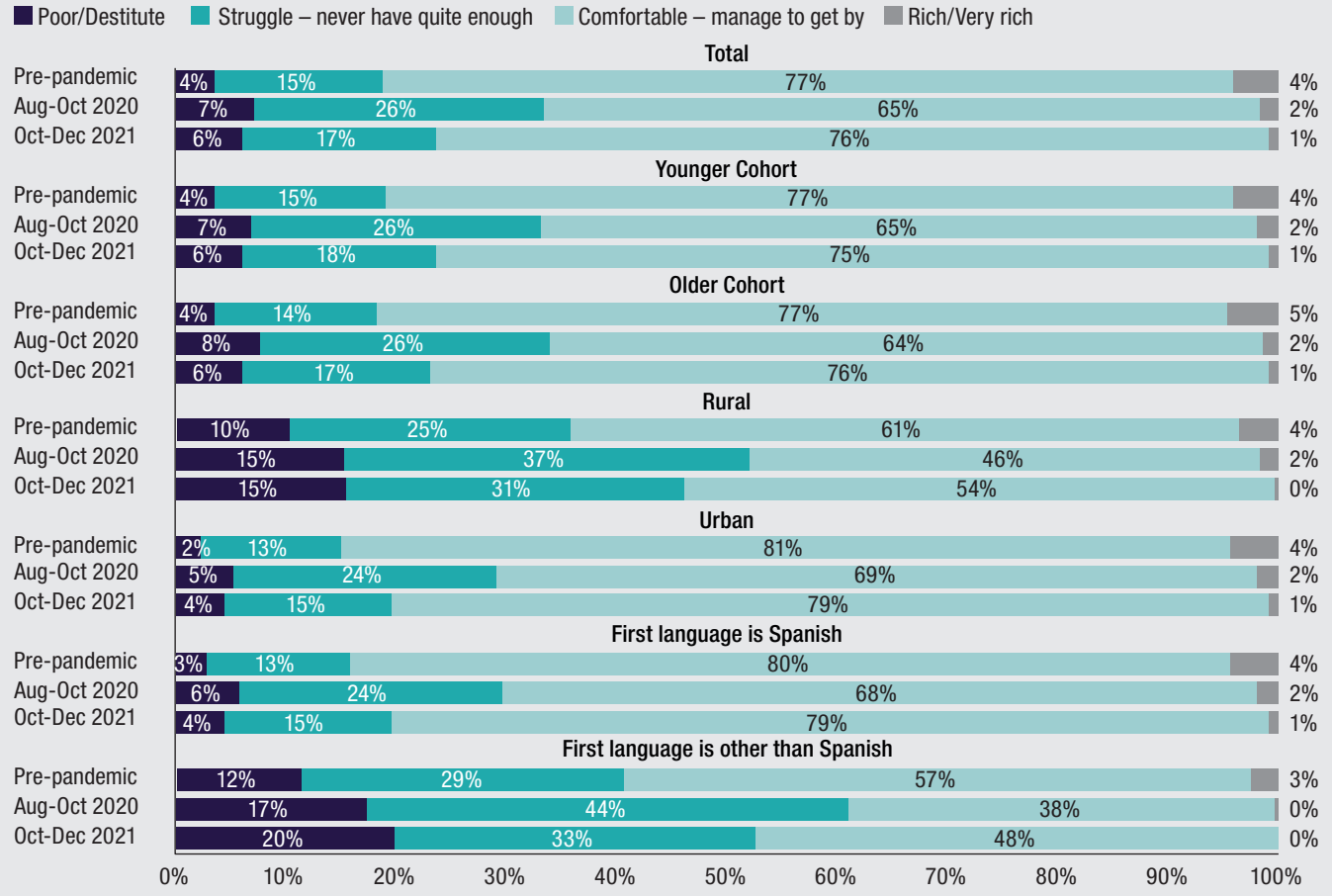
Figure 2: *Percentage of 26–27 year olds in work since the beginning of the pandemic*



Note: Estimates use sampling weights.

5 The information for work status before the pandemic, during the 2020 national lockdown and in March 2021 is based on recalled employment status (recorded in Call 2 and Call 5). This includes 95 per cent confidence intervals around the share of those in work at each point in time.

Figure 3: *Changes in subjective household wealth since the beginning of the pandemic*



Note: Estimates use sampling weights.

Food security

To analyse changes in food security and the presence of food insecurity over the course of the pandemic, we compared responses from November–December 2020 (Call 3) and October–December 2021 (Call 5). In both calls, we asked whether the respondent (or those in their household) had worried about running out of food in the past 12 months due to a lack of money, and also whether they had actually run out of food during that period. A 'yes' response to the first and second questions would be consistent with (at least) mild and severe food insecurity, respectively.[6]

Mild food insecurity has become more widespread since the end of 2020, though there has been an encouraging decline in severe food insecurity. By October–December 2021, 63 per cent of respondents had worried about running out of food at least once in the past year, an increase from 54 per cent in 2020.

Those living in the poorest households and whose mother tongue is not Spanish were more likely to be worried about running out of food. Notwithstanding this, mild food insecurity had increased more among those living in the better-off households and whose first language is Spanish.

Conversely, the percentage of respondents reporting severe food insecure (measured as actually running out food) **decreased from 9 per cent to 5 per cent over the same period**. This is likely to be as a result of the relaxation of economic restrictions and lockdowns in 2021. Severe food insecurity decreased across all groups, with the largest reduction among those whose mother tongue is not Spanish.

5. The impact of COVID-19 on mental health

As in previous calls, we investigate the impact of the pandemic on young people's mental health using the Generalised Anxiety Disorder Assessment (GAD-7) to measure anxiety and the Patient Health Questionnaire (PHQ-8) to measure depression.[7] Anxiety and depression are defined here as at least mild symptoms of either condition.

6 We used comparable questions from the Food Insecurity Experience Scale (FIES) used in Call 3 of the phone survey (Ballard, Kepple, and Cafiero 2013) and the Household Food Insecurity Access Scale (HFIAS) employed in Call 5 (Coates, Swindale, and Bilinsky 2007). Under the definition used in the HFIAS, worrying about having sufficient food to eat is consistent with at least mild food insecurity, whereas running out of food is consistent with severe food insecurity.

7 GAD-7 and PHQ-8 consist of seven and eight statements, respectively, recording if the respondents experienced any of the anxiety and depression symptoms listed and how often. To calculate the GAD-7 and PHQ-8 scores, values of 0, 1, 2, and 3 are assigned to the frequency of symptoms reported ('not at all', 'several days', 'more than half the days', and 'nearly every day') and summed. Mild anxiety or depression is defined using a 5-point threshold on either scale (Spitzer et al. 2006; Kroenke et al. 2009). The scales were adapted for use during a phone survey: see Porter et al. (2021) for details.

Young people in Peru continue to report the highest levels of depression and anxiety among the four Young Lives study countries. Following a moderate decline in November–December 2020 (Call 3), rates of depression and anxiety remained largely the same by October–December 2021, **with 24 per cent reporting symptoms of depression (compared to 25 per cent in November–December 2020), and 30 per cent reporting symptoms of anxiety (compared to 31 per cent).**

Although the burden of COVID-19 cases and pressure on the health system in Peru had subsided substantially by the end of 2021 (relative to the dramatic surge in cases earlier in the year), it seems reasonable to speculate that these events may still be affecting the mental health of the young people. Similarly, previous Young Lives evidence suggests a relationship between anxiety and depression with the level of food insecurity observed since the beginning of the pandemic (Porter et al. 2022).

Concluding remarks

Nearly two years since the start of the pandemic, and following two devastating waves of COVID-19 that killed more than 200,000 people, there are reasons to be moderately optimistic. Most of the population in Peru is now vaccinated, employment levels appear to be on the road to recovery, and severe food insecurity has reduced.

However, several key challenges remain. The pandemic has widened inequalities in education, with the digital divide leaving behind those without adequate access to the internet. Gender gaps in employment have deepened, partially due to an increase in domestic work and childcare responsibilities that disproportionately affect young women. Given these continued challenging circumstances, it is perhaps unsurprising that reported rates of depression and anxiety remain very high among young people.

From a policy perspective, the reopening of schools and higher education institutions remains of the upmost importance, alongside catch-up education programmes to help address learning losses and targeted support so that those who have been forced to drop out can return to their studies. Social protection and safety nets need to be strengthened across the country to help address widening inequalities, from enabling universal access to COVID-19 testing and vaccinations, to accessing appropriate childcare services to help get young women back to work. Our research suggests that emergency cash transfers are not effective social policy tools in this context (Curi-Quinto et al. 2021). It is critical to ensure that the new government puts in place effective policy responses to protect the most vulnerable, without which we may see many young people unable to recover, putting progress towards the Sustainable Development Goals even further off track.

We expect to visit the Young Lives families again in 2023 to monitor the long-term impacts of the coronavirus pandemic on young people's lives and well-being, as well as areas of recovery.

References

Ballard, T.J., A.W. Kepple, and C. Cafiero (2013) 'The Food Insecurity Experience Scale: Development of a Global Standard for Monitoring Hunger Worldwide', Rome: FAO, https://www.fao.org/fileadmin/templates/ess/voh/FIES_Technical_Paper_v1.1.pdf (accessed 7 February 2022).

Central Reserve Bank of Peru (2021) 'Inflation Report December 2021: Current Overview and Macroeconomic Projections 2021-23', https://www.bcrp.gob.pe/docs/Publicaciones/Reporte-Inflacion/2021/diciembre/reporte-de-inflacion-diciembre-2021.pdf (accessed 10 February 2022).

Coates, J., A. Swindale, and P. Bilinsky (2007) 'Household Food Insecurity Access Scale (HFIAS) for Measurement of Household Food Access: Indicator Guide (v.3)', Washington, DC: FHI 360/FANTA, https://www.fantaproject.org/sites/default/files/resources/HFIAS_ENG_v3_Aug07.pdf (accessed 7 February 2022).

Curi-Quinto, K., A. Sánchez, N. Lago-Berrocal, M. Penny, C. Murray, R. Nunes, M. Favara, A. Wijeyesekera, J.A. Lovegrove, V. Soto-Cáceres, and K.S. Vimaleswaran (2021) 'Role of Government Financial Support and Vulnerability Characteristics Associated with Food Insecurity During the COVID-19 Pandemic Among Young Peruvians', *Nutrients* 13.10: 3546.

Kroenke, K., T.W. Strine, R.L. Spitzer, J.B.W. Williams, J.T. Berry, and A.H. Mokdad (2009) 'The PHQ-8 as a Measure of Current Depression in the General Population', *Journal of Affective Disorders* 114.1-3: 163–73.

Peru National Institute of Statistics and Information (2021) 'Monetary Poverty Reached 30.1 per cent of the Country's Population During 2020', https://www.inei.gob.pe/prensa/noticias/pobreza-monetaria-alcanzo-al-301-de-la-poblacion-del-pais-durante-el-ano-2020-12875 (accessed 10 February 2022).

Porter, C., M. Favara, A. Hittmeyer, D. Scott, A. Sánchez, R. Ellanki, D. Le Thuc, T. Woldehanna, M.G. Craske, and A. Stein (2021) 'Impact of the COVID-19 Pandemic on Anxiety and Depression Symptoms of Young People in the Global South: Evidence from a Four-country Cohort Study', *BMJ Open* 11.4: e049653.

Porter, C., A. Hittmeyer, M. Favara, D. Scott, and A. Sánchez (2022) 'The Evolution of Young People's Mental Health During COVID-19 and the Role of Food Insecurity: Evidence from a Four Low-and-middle-income-country Cohort Study', *Public Health in Practice* 3: 100232.

Scott, D., R. Freund, M. Favara, C. Porter, and A. Sánchez (2021) 'Unpacking the Post-lockdown Employment Recovery of Young Women in the Global South', (No. 14829), Bonn: Institute of Labor Economics (IZA), https://covid-19.iza.org/publications/dp14829 (accessed 7 February 2022).

Spitzer, R.L., K. Kroenke, J.B. Williams, and B. Lowe (2006) 'A Brief Measure for Assessing Generalized Anxiety Disorder: The GAD-7', *Archives of Internal Medicine* 166.10: 1092–7.

Acknowledgements

This report is part of a series of reports providing headline findings from the fifth call of the Listening to Young Lives at Work Phone Survey, conducted in Ethiopia, India, Peru and Vietnam between October and December 2021.

The report was written by Alan Sánchez, Jennifer López, Kath Ford, Santiago Cueto, Katherine Curi-Quinto, and Mary Penny. Thanks to Sofía Madrid (Field Manager), Monica Lizama (Data Manager), and the team of 13 enumerators who made the phone survey possible. We also extend our thanks to Marta Favara, Douglas Scott, Catherine Porter, and the research team in Oxford for their support, and to Vanessa Rojas for her thoughtful comments.

We particularly wish to thank the Young Lives respondents for generously giving us their time and cooperation.

Thanks also to Adam Houlbrook for copyediting, Garth Stewart for design, and Julia Tilford for oversight of the publication of all Young Lives summative reports.

Special thanks to the Foreign, Commonwealth and Development Office (FCDO) for funding Young Lives at Work and enabling this research in response to the COVID-19 pandemic, and to the Old Dart Foundation for enabling us to complete the phone survey in 2021. We also wish to thank PROCIENCIA (CONCYTEC/FONDECYT), the British Embassy in Peru, the Medical Research Council, and the Newton Fund, for additional support.

The views expressed are those of the authors. They are not necessarily those of, or endorsed by, the University of Oxford, Young Lives, the UK Government or other funders.

Young Lives at Work is funded with UK aid from the UK government

UKaid from the British people

Young Lives is an international study of childhood poverty and transitions to adulthood following the lives of 12,000 children in four countries (Ethiopia, India, Peru and Vietnam). Young Lives is a collaborative research programme led by the University of Oxford. In Peru, Young Lives is known as Niños del Milenio, and is conducted in partnership with the Instituto de Investigación Nutricional (IIN) and the Grupo de Análisis para el Desarollo (GRADE).

ODF OLD DART FOUNDATION

Young Lives, Oxford Department of International Development (ODID)
University of Oxford, 3 Mansfield Road, Oxford OX1 3TB, UK

www.younglives.org.uk • www.ninosdelmilenio.org
Tel: +44 (0)1865 281751 • Email: younglives@qeh.ox.ac.uk • Twitter: @yloxford

Young Lives