RAPID GENDER ASSESSMENT (RGA)

for the COVID-19 situation in the Republic of Kazakhstan

ALMATY, 2020

Rapid Gender Assessment for the COVID-19 situation in the Republic of Kazakhstan has been prepared by the Center for Social and Political Studies "Strategy" for UN Women and UNFPA.

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RAPID GENDER ASSESSMENT (RGA) FOR THE COVID-19 SITUATION IN THE REPUBLIC OF KAZAKHSTAN

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Content

I. Introduction

In view of the growing number of infected people and the number of deaths caused by COVID-19, many countries have introduced a state of emergency and special quarantine regime that require partial or complete isolation of citizens at the place of residence, leading to pressure on the health, economic and social systems. In Kazakhstan, a state of emergency was declared on March 16, 2020 due to registered cases of coronavirus (COVID-19), first in two largest cities, Almaty and Nur-Sultan, and then in other cities and regions of the country.

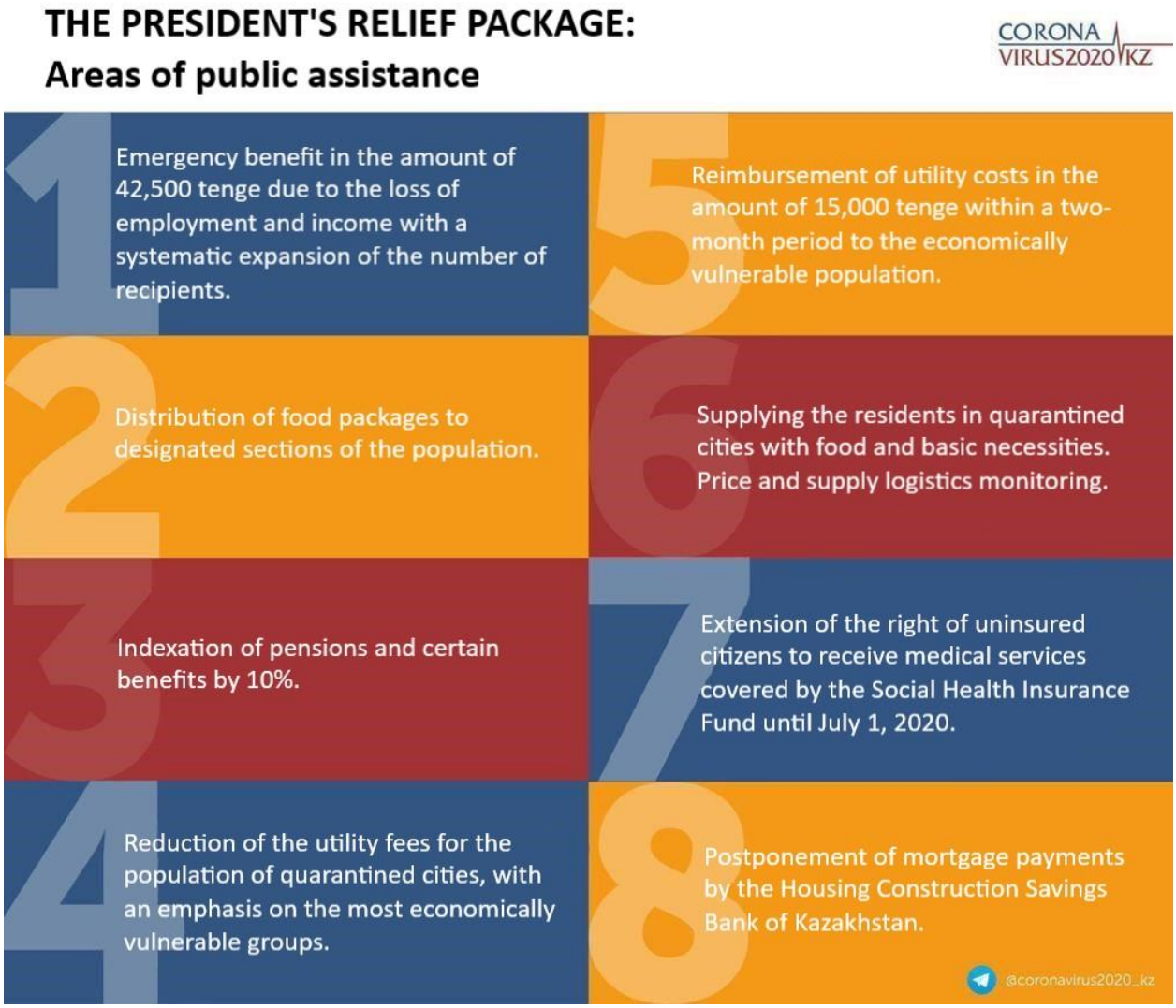
As of May 18, 2020, in Kazakhstan, according to the Ministry of Health (https://www.coronavirus2020.kz/), there were 6,751 registered cases. The number of lethal cases amounted to 35. Official data on mortality from COVID-19 by gender and age have not been provided for the entire period of virus spread. The regional breakdown of the statistics on mortality as of May 18, 2020 was as follows:

Nur-Sultan – 5;
Almaty – 10;
Shymkent – 6;
Akmola region – 4;
East Kazakhstan region – 1;
Jambyl region – 1;
Karaganda region – 3;
Kostanay region – 1;
Mangystau region – 1;
Pavlodar region – 2;
Turkistan region – 1.

Quarantine and self-isolation in the midst of a pandemic are vital, as they help to "flatten the curve" and reduce the number of new infections. At the same time, self-isolation has its downside, namely: a deterioration of the economic security of households, a decrease in the availability of social and medical care for vulnerable groups, an increase in cases of domestic violence, a significant increase in the burden on women due to unpaid domestic work. It is expected that the situation with COVID-19 may have a serious impact on the situation of vulnerable population, as well as gender, age, and disability inequalities.

Assuming these and other negative consequences, a package of relief measures was adopted in Kazakhstan for the period of COVID-19 outbreak. From the speech of the President of the Republic of Kazakhstan K. Tokayev on May 11, 2020 on the occasion of the end of the state of emergency (SE): "4 million 250 thousand people (*out of more than eight million people who applied for a social benefit payment from the state. – Author's note*) received financial assistance. Over 570,000 people received food packages. We plan to provide food products to more than 1.1 million people in Kazakhstan. Funds are allocated from the Birgemiz Fund, established at the initiative of the First President, Yelbasy. *Nur Otan* party is actively working. More than 1.6 million people will receive assistance from the state to pay for public utilities in April-May (*15 thousand tenge. – Author's note*). More than 1.6 million citizens and 11.5 thousand SMEs received deferrals on repayment of loans and credits for a total of more than 360 billion tenge. Tax incentives cover

more than 700,000 companies and individual entrepreneurs, which will save them about 1 trillion tenge. Funds have been allocated for small and medium businesses loans at acceptable rates."[1]



To develop recommendations on prevention and minimization of the negative social and economic impact on women and vulnerable groups in the context of COVID-19, Women Count Global Programme initiated an international research project of Rapid Gender Assessment (RGA) for the COVID-19 situation in Europe and Central Asia (ECA).

Gender analysis is a tool that is used to identify and address the different needs, opportunities and survival strategies of women and men before, during and after emergencies or crisis situations. Rapid Gender Analysis (RGA) provides important information on gender roles and responsibilities, opportunities and vulnerabilities that have emerged in society.

The results of the survey will be used to: a) adjust response plans to address the gender-specific nature of the pandemic; b) identify key priorities to support the most vulnerable groups in the COVID-19 context; and c) understand different aspects of the social well-being of people in the context of COVID-19. This research project could thus become a major data source for broader analysis of the socio-economic impact of the crisis at the individual / household level.

[1] http://www.akorda.kz/ru/speeches/internal_political_affairs/in_speeches_and_addresses/vystuplenie-glavy-gosudarstva-na-zaklyuchitelnom-zasedanii-gosudarstvennoi-komissii-po-chrezvychainomu-polozheniyu

In Kazakhstan, the research is being conducted with the joint support of the United Nations Women and the United Nations Population Fund (UNFPA).

II. Summary of Methodology

Research objective

The main objective of the study in the context of the emergency situation in Kazakhstan is to conduct a gender analysis of the impact of the crisis on women and men, girls and boys in order to compare the pre-crisis gender equality situation with the changes in the issues and social norms brought about by the crisis. Recognizing that the COVID-19 outbreak will increase women's vulnerability as a result of the widespread impact of the pandemic, the main objective of this study is to understand the variability in the impact of the changing situation on the lives of women and men and to provide the necessary support for the implementation of measures aimed at ensuring that gender aspects are adequately taken into account in the preparation and implementation of the response to COVID-19. The study also aims to capture multiple dimensions of the lives of people in the context of COVID-19 and the major challenges they face in their daily activities. In particular, the study addresses the following questions:

1. How do emergency and / or quarantine measures affect economic security and sources of household income: have they changed or remained the same?
2. Do households have access to basic social services and to what extent does the emergency and / or quarantine regime prevent timely access to these services?
3. What are the basic needs, opportunities and survival strategies for securing economic resources and maintaining livelihoods?
4. Do women and men participate equally in the sharing of the workload and unpaid domestic work under COVID-19?
5. Is there any support available for women doing the demanding but low-paid or entirely unpaid domestic work?
6. Do school closures and distance learning, changes in working conditions, movement restrictions and self-isolation affect the current financial situation of women and men? How will this affect the economic situation of women and men in the short-term perspective?

Questionnaire

The questionnaire is designed to allow for the fast data collection required for the rapid gender analysis in the context of the COVID-19 pandemic. It emphasizes the relative changes that have occurred since the outbreak of the COVID-19 epidemic. The questionnaire is based on a tool developed by the Women Count Data Hub and has been tailored to address country-specific themes and issues. The questionnaire was available in the Kazakh and Russian languages.

The questionnaire is designed to assess gender differences in the impact of the COVID-19 pandemic on key challenges faced by women and men, including their economic opportunities and vulnerabilities, and changes in their well-being and resources.

The questionnaire consists of seven questions in the socio-demographic section and 22 thematically focused questions distributed in four sections:

1. Main source of information

2. Work and resources for sustaining livelihoods
3. Distribution of the housework
4. Access to basic services and security

Data collection method

Given the limitations imposed by the COVID-19 pandemic on face-to-face residential data collection, online and telephone interviews were identified as the most appropriate means of data collection for this research project. In the context of the Republic of Kazakhstan, a combined approach was used to collect data through an online survey for the urban population and a telephone survey for rural residents and respondents over 55 years of age.

The online survey was implemented on the basis of a specialized Internet platform Qalaisyn.kz. The telephone survey was carried out using the lists of participants (aged 18 and over) in national surveys conducted by the public foundation Center for Social and Political Studies "Strategy".

Therefore, the target groups for the survey were, first of all, registered members of the Internet community Qalaisyn.kz. Qalaisyn.kz is an Internet platform for marketing and public opinion research. As of April 1, 2020, the number of registered member accounts was confirmed at 6,135 (https://www.qalaisyn.kz/), of which: 4,155 accounts have completed the social and demographic profile, which allows making a targeted selection of respondents according to the quota. Second group was comprised of the participants of the national polls conducted by the Center for Social and Political Studies "Strategy", aged 18 and over. The database of respondents was compiled on the basis of itinerary sheets filled in using the data from face-to-face interviews.

A total of 1,076 respondents, or 48.9 per cent of the participants, completed the online survey, and 1,126 respondents, or 51.1 per cent of the participants, completed the telephone survey.

The telephone survey was conducted in all parts of the country under the supervision of experienced supervisors. A total of 17 supervisors and 3 to 5 interviewers per country region were involved in the fieldwork.

The data collection was conducted between April 25 and May 3, 2020.

Sample Size

The sample size totaled to 2,202 respondents, which meets the requirement for the 3% confidence interval, implying 0.95 probability. The study relied on a proportionately stratified sample, using the quota method for selection of units of observation. The quota sampling principle is based on the idea of similarity of objects in case of proportionality of their structural elements.

The structure of the sample population was formed on the basis of statistical data on the structure of population in the regions of the country provided by the Committee on Statistics of the Ministry of Economy of the Republic of Kazakhstan as of January 1, 2019 and represents the population of the Republic of Kazakhstan aged 18 years and older by gender, age, place of residence (*see Table 1*).

Table 1. – Quota allocation by region, area and gender

#	Region (oblast)	Locality	Men		Women		Total urban/rural		Total by region	
			number	%	number	%	number	%	number	%
1	Akmola	Urban	21	46.7	24	53.3	45	47.4	95	4.3
		Rural	23	46.0	27	54.0	50	52.6		
2	Aktobe	Urban	35	45.5	42	54.5	77	77.0	100	4.5
		Rural	10	43.5	13	56.5	23	23.0		
3	Almaty	Urban	28	53.8	24	46.2	52	22.5	231	10.5
		Rural	84	46.9	95	53.1	179	77.5		
4	Atyrau	Urban	19	48.7	20	51.3	39	52.0	75	3.4
		Rural	20	55.6	16	44.4	36	48.0		
5	East Kazakhstan	Urban	51	46.4	59	53.6	110	61.1	180	8.2
		Rural	29	41.4	41	58.6	70	38.9		
6	Jambyl	Urban	22	41.5	31	58.5	53	39.8	133	6.0
		Rural	40	50.0	40	50.0	80	60.2		
7	West Kazakhstan	Urban	22	50.0	22	50.0	44	51.2	86	3.9
		Rural	20	47.6	22	52.4	42	48.8		
8	Karaganda	Urban	69	45.7	82	54.3	151	87.3	173	7.9
		Rural	9	40.9	13	59.1	22	12.7		
9	Kostanay	Urban	28	47.5	31	52.5	59	54.1	109	5.0
		Rural	24	48.0	26	52.0	50	45.9		
10	Kyzylorda	Urban	22	52.4	20	47.6	42	46.7	90	4.1
		Rural	21	43.8	27	56.3	48	53.3		
11	Mangystau	Urban	15	50.0	15	50.0	30	38.5	78	3.5
		Rural	23	47.9	25	52.1	48	61.5		
12	Pavlodar	Urban	34	48.6	36	51.4	70	66.0	106	4.8
		Rural	19	52.8	17	47.2	36	34.0		
13	North Kazakhstan	Urban	15	41.7	21	58.3	36	45.6	79	3.6
		Rural	24	55.8	19	44.2	43	54.4		
14	Turkistan	Urban	20	52.6	18	47.4	38	19.4	196	8.9
		Rural	80	50.6	78	49.4	158	80.6		
15	Nur-Sultan (city)	Urban	59	46.5	68	53.5	127	100.0	127	5.8
16	Almaty (city)	Urban	105	44.7	130	55.3	235	100.0	235	10.7
17	Shymkent (city)	Urban	50	45.9	59	54.1	109	100.0	109	5.0
			1041	**47.3**	**1161**	**52.7**	**885/1317**	**40.2/59.8**	**2202**	**100.0**

Data Processing

The data were entered and processed using SPSS 21.0 for Windows.

III. Executive Summary

According to the survey results, the main sources of information about COVID-19 for the population are the Internet and social networks: 52% of the survey participants, or one in two, pointed to these sources.

The second most popular source of information is the traditional media: television, radio and newspapers. 25% of the survey participants, or one in four, pointed to the traditional media as their main source of information.

The younger audience is more likely to use Internet sources and messengers, while the audience over 55 years of age is more likely to use traditional media. The use of the Internet as the main source of information is equally prevalent in both urban and rural areas. At the same time, rural residents tend to prefer traditional mass media, while urban residents take information from official sources more seriously.

64% of survey participants are satisfied with the quality of information about COVID-19 they receive from the Internet, social networks and traditional media (TV / radio / newspapers). The respondents who are dissatisfied with the information are more often found among men, in the age group of 55-64, in the low-income group, among respondents who live with children under 17 and older people over 65. Moreover, the more children or pensioners live in the respondent's household, the higher the level of dissatisfaction with the available information.

Only one in three respondents (30%; n=420) who had an employment before COVID-19 (n=1,383, excluding family workers and women on maternity leave) confirmed that the number of hours devoted to paid work has not changed, i.e. they continue to perform their work functions in full. In the largest group of employed respondents, represented by wage earners (52.2 per cent, n=1,149), one in five lost their jobs and one in three experienced a decline in their income while keeping their jobs. Among women, retention of paid employment at the pre-quarantine level (the cumulative percentage of answers "increased" and "unchanged") is less common than among men – 32% against 40%.

In the group of self-employed (10.6%, n=234), six out of ten employers / self-employed (60%) had to completely stop their business after the COVID-19 outbreak. The 37% of employers / self-employed continue to operate their business under COVID-19 conditions, with 20% noting a decline in business activity, and only 17% managing to maintain a pre-quarantine income level. At the same time, the survey revealed that not all employers / self-employed have been carrying out their business activities/providing services legally: every fourth business (27%; n=44) had no official registration. Among the unregistered businesses, the share of women-led enterprises is 43%, while that of men-led – 57%. In the context of a crisis, such businesses have no legitimate right to claim any government support or assistance.

In the Republic of Kazakhstan, as part of the relief effort to support citizens who have lost their jobs, the registered entrepreneurs (IPs, micro-businesses) and individuals who found themselves in a difficult financial situation amid the COVID-19 emergency measures and who submitted a claim received a monthly payment of 42,500 tenge to support their livelihoods. According to the survey results, 32% of salaried employees and 54% of employers / self-employed took the opportunity to apply for financial assistance from the state or local authorities.

Overall, the share of women who lost their jobs among those employed before COVID-19 was 26 per cent. These are more often young women aged 18-34, urban dwellers, married with or without children. Among previously employed men, the proportion of those who lost their jobs was 21 per cent. These are more often young men aged 18-34, urban dwellers, married but with no children.

39% of salaried employees were sent off on leave after the announcement of the state of emergency, while 56% continue to work and receive income from paid employment. In the age group of 18-34 years old, men are more likely to continue to work than women. Women are more likely to remain employed in the age group of 35 and older. However, women with children have a higher chance of being on a quarantine leave than women without children. Among the latter, there is a higher proportion of those who continue to work.

Men aged 45-54 years and 55-64 years were the most likely to be on unpaid leave. Among women, the age groups 18-34 and 55-64 were more likely to be on unpaid leave. In view of the employment challenges for workers over 45 years of age, there is a high probability that these respondents will not be (re)employed after the quarantine.

According to the survey results, the most significant negative changes have been observed in such household support resource as income from paid work/wages, with almost one third of respondents indicating that it has decreased and only 1% of respondents indicating its increase during the COVID-19 period. At the same time, estimates show that such a common resource as family / friend support has changed in a number of different ways: a significant proportion of respondents said that family support has both improved and deteriorated, or remained unchanged. However, women and men assess the situation with the available household resources during the quarantine period differently: men are more likely to believe that the resources have decreased, and this conclusion is most accurate with regard to depletion of income / earnings from own business / free-lancers activities (4.7% gap between the answers of women and men).

Taking into account that the total share of respondents with low and below average level of income is 48%, 6 out of 10 respondents experience financial difficulties. 62% of survey participants believe that if quarantine continues, it will be difficult for them to cover basic costs (purchase of food and hygiene products), 59.6% may experience difficulties paying utility bills, and 56.2% may have to stop using paid medical services / assistance. Almost every third respondent will be in need of external assistance. 44.5% of respondents will have to ask for help from friends and relatives, 31.3% – to apply for assistance from local authorities, every fourth respondent (27.2%) will try to apply for a loan.

From the gender perspective, women were more likely to say that if restrictive measures were to continue, they would face the problem of optimizing / cutting back on their household expenditures while men were more likely to say they would seek external (outside the household) financial instruments such as loans and social assistance.

40% of the survey participants indicated their enrollment in the state support system during the period COVID-19. Among them: 13% believe that the state support has increased during the COVID-19 period, 5% believe that it has decreased, and one in five respondents (22%) believe that it has remained unchanged. Only 22% of civil sector organizations are covered by the government aid program, of which 15% believe that the assistance they have been receiving has not changed during the COVID-19 period.

The total share of respondents who have received in-kind assistance from different stakeholders is 8.5%. 6.2% said that they received assistance from the government; 4.8% – from the non-governmental sector; another 3.4% – from businesses. Social baskets most commonly consisted of groceries and personal protective items (gloves, masks, disinfectants, etc.).

During the spread of COVID-19, the survey participants most often faced difficulties in accessing health services as well as goods and food supplies. However, men reported more problems with access to basic services compared to women. And families with children were the most vulnerable.

Amongst the difficulties experienced in quarantine, the most frequently cited by the respondents (40 per cent and above) were the closure of schools or reduction of a school-related activities for children and the impact on psychological / emotional well-being (stress, anxiety).

With regard to the distribution of household chores, under the quarantine conditions Kazakhstanis began to spend more time on educating children and caring for older family members than on everyday household chores.

In terms of domestic work, 4 out of 10 survey participants believe that the time spent on daily household chores has not changed during the quarantine period. At the same time, the general trend towards the increase of the time spent on household chores is obvious: survey participants began to spend more time on cleaning and cooking – 34% and 30% respectively. One in five respondents (21%) started a renovation or home improvement project during the quarantine period.

During the isolation, women, more than men, experienced an increase in the amount of domestic work. While the cumulative percentage of men who have increased time spent on three or more types of household chores is 26 per cent, the percentage of women in this category is 40 per cent.

Almost one in two women respondents indicated an increase in time spent on cleaning and cooking (47 per cent and 43 per cent). Men were more likely to be responsible for household repairs (26%), grocery shopping (25%) and keeping the house clean and organized (21%).

Women increased the time spent on care work more (from 18% to 41%) than men. Women spend more time on taking care of physical needs and hygiene of their children (36%) and other family members in need of care (18%). At the same time, married women began to spend more time caring for their children while unmarried women – for older family members.

However, almost one in three male respondents said that they have started to help children with their studies more (32%) as well as to spend leisure time with their children (30%) and older family members (30%). It should be noted that men who live in urban areas are influenced by gender stereotypes regarding the distribution of housework to a lesser extent compared to men in rural areas. They spend almost twice as much time as rural men on such activities as cooking (18% vs. 10%), cleaning up the house (25% vs. 15%), shopping (32% vs. 17%). Similarly, urban men began to spend more time on education and leisure activities for their children compared to their rural counterparts.

Despite the excessive workload, women are more likely to try to help their spouses. It should be noted that other family members, including children, have begun to help their parents more with household chores.

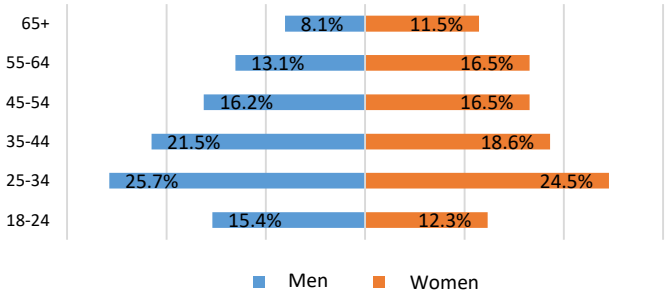
About 15% of respondents are aware of an increase in cases of domestic violence since the beginning of the COVID-19 pandemic. More often than others, the growth in domestic violence rates during quarantine was reported by women, urban residents, respondents aged 25-34 years (17%), divorcees (23%), and representatives of the low-income section of the population (22%). Of those who are aware of the facts of domestic violence, every ninth respondent is aware of the use of the hotline service, requests for psychological support or reports to the police. Rural women and men were more likely than urban women to report on incidents of domestic violence.

During the quarantine period, 13-16% of women used various services related to reproductive health. Six per cent had encountered major or some difficulties in accessing services for maternal health.

IV. Sociodemographic Profile of Respondents

The survey was completed by 2,202 respondents, of which 59.8% were urban residents and 40.2% rural residents. The proportion of men and women was 47.3% and 52.7% respectively.

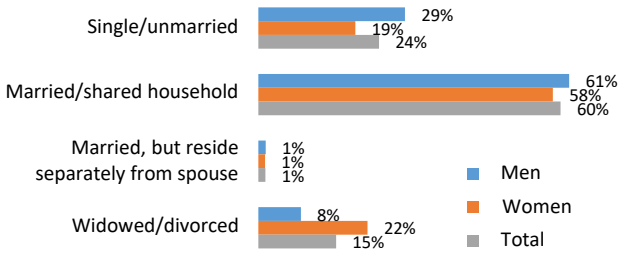
Figure1. - Age and sex pyramid of survey participants, (%)



Kazakhstan is a young country: the average age in the country is 29.3 years.[2] At the same time, according to the official statistics, the age and gender pyramid of the adult population (18+) in the country is of the stationary type. According to the age and sex pyramid of Kazakhstan, the proportion of men aged 18 to 35 years in the country is higher than that of women. The share of women is increasing in older age groups: there are more women than men of the pre-retirement and retirement age in the country. The survey results clearly confirm this trend. Also, according to the survey results, it is evident that the age cohort of 18-24 years is 1.5 times smaller than the age cohort of 25-34 years (*see Figure 1*), which is a consequence of the "demographic dip of the 1990s". The 25-34 age group is the most numerous (25%).

According to the official statistics, the predominance of women in older age groups is a consequence of higher mortality rates among men. The survey results confirm this trend. (*see Figure 2*) Among female respondents, one in ten is a widow. In the age group 55-64 years, the proportion of widowed women is 18 per cent and that of widowed men 4 per cent. Among women over 64 years of age, 54 per cent are widowed and among men over 64 years of age, 20 per cent are widowed.

Figure2. - Family status of survey participants, %



Among female respondents, the divorce rate is twice as high as that of male respondents – 11% against 6%. The proportion of unmarried men is higher than that of women – 29% vs. 19%, as well as the proportion of those who are legally married or live with a partner – 61% vs. 58% (among women).

Among those surveyed, one in five (20%) replied that they had a single-person household (*see Figure 3*). The proportion of women living in a single-person household is slightly lower than that of men – 19% and 22% respectively. Most households (66 per cent) have at least two economically active members aged 18-64 years. (*see Figure 4*).

[2] https://countrymeters.info/ru/Kazakhstan

Figure3. - Respondents' Household Sizes (%by gender)

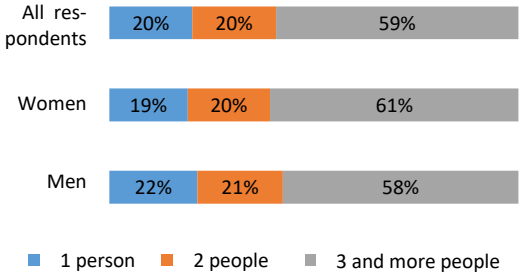
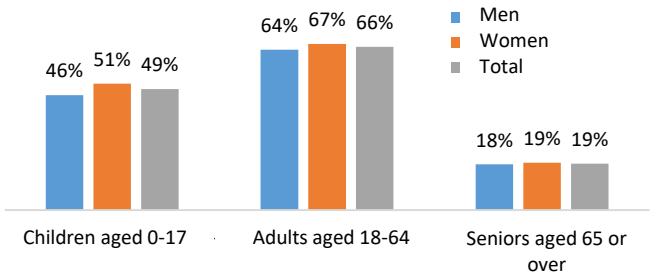


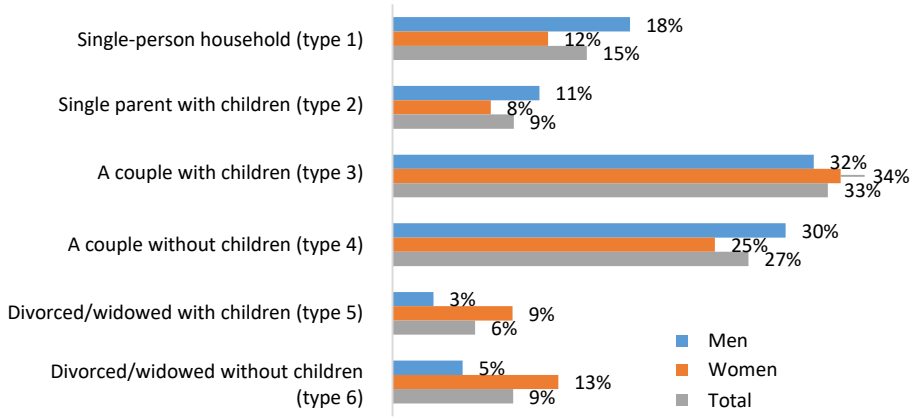
Figure 4.- Presence of three (main) age cohorts in the household, (% by gender)



Nearly 1 in 5 households (19 per cent) have persons over 65 years of age, and 1 in 2 (49 per cent) have children under 17. Female respondents were more likely to report having children under 17 in the household than male respondents – 51% versus 46% respectively.

All households can be divided into 6 types based on family status and household size (except for those married but residing separately). (*see Figure 5*) The most represented are households comprising couples with children (33.2%, type 3) or couples without children (27.2%, type 4). About 24 % of households are a single-person household: 15% are households in which the person has never been married (type 1) and 9% – widowed/divorced persons without children (type 6). 15.6% are households with 1 parent and children, of which: 9% are single parents (type 2), 6% have a deceased or separated parent (type 5).

Figure5. - Types of households of survey respondents (% by gender)



Respondents with professional training prevail among the survey participants, of which: with secondary vocational training – 36.8%, with higher education – 41.7%. (*see Figure 6*) It should be noted that since 2000, there has been an upward trend in the country's gross university

Figure 6.- Education level of respondents (%)

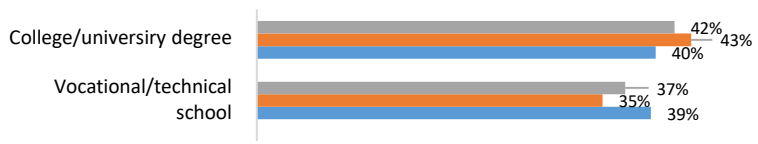
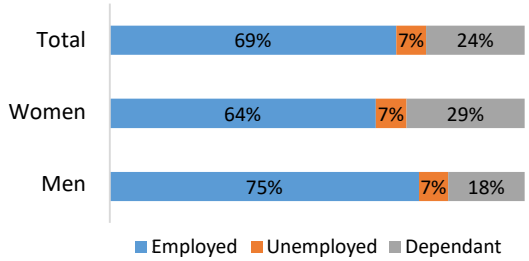


Figure7. - Employment status of the respondents (% by gender)



enrollment rate among both sexes,[3] and the literacy rate is 99.79% of the total adult population (15+)[4].

The majority of survey participants (69%) are employed. 7% are unemployed; this group includes those survey participants who indicated that they were unemployed before quarantine and were looking for a job. 24% are broadly defined as dependents; this group includes those who have never worked due to health or other reasons, as well as pensioners and full-time students. (*see Figure 7*). The survey revealed that while the unemployment rate among women and men is equal (7 per cent each), the employment rate among women is lower than that among men – 64 per cent against 75 per cent. Consequently, women are more likely to be dependents than men – 29% vs. 18%. (*for details, see 2.1., p.16*).

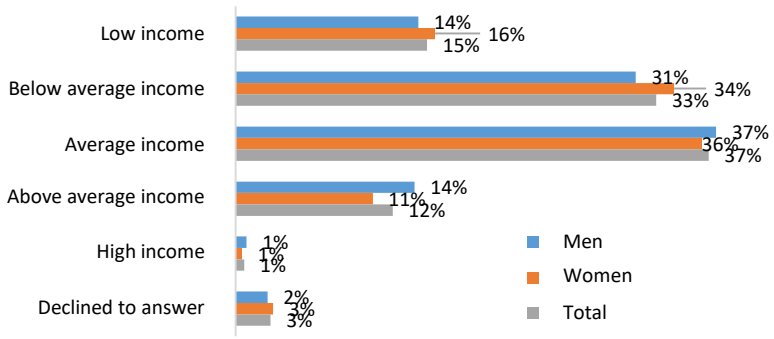
To assess the welfare of the survey participants, we used a subjective assessment of the household consumer potential. Survey participants were asked to identify themselves as belonging to one of the 5 groups, depending on the accessibility of material goods and assets. The groups were as follows:

Group	Indicator	Classification
1	We can barely make ends meet. There's not enough money even for food	Low income
2	We have enough money for groceries, but shopping for clothes leads to financial constraints	Below average income
3	We have enough money for groceries and clothes. But it's hard for us to buy durable goods	Average income
4	We can afford durable goods. But it's hard for us to buy really expensive things like a car, an apartment	Above average income
5	We can afford quite expensive things - an apartment, a summer house and much more	High income

[3] Gross tertiary education enrollment rate, by gender. https://gender.stat.gov.kz/page/frontend/detail?id=37&slug=-31&cat_id=8&lang=ru. Retrieved on: 10/05/2020.

[4] https://countrymeters.info/ru/Kazakhstan

Figure 8.- Welfare level of respondents (% by gender)



According to the survey results, the largest groups are those with average and below average income levels – 33% and 37% respectively. The total share of respondents with high and above average income levels is 13%. 15% ranked themselves as being low income ("there is not enough money even for food"). Women were slightly more likely than men to indicate low income (16% vs. 14%) or lower than average income (34% vs. 31%). (*for more details, see 3.1, p.23*).

It should be noted that according to the Committee on Statistics of the Ministry of Economic Development of the Republic of Kazakhstan, in the first quarter of 2020, the nominal salary of one employee in Kazakhstan was 200,332 tenge. At the same time, the real wage index was at 96.2 compared to the previous period, which indicates a decline in the consumer capacity of households for the current period compared to the fourth quarter of 2019.

On the whole, the analysis of the sociodemographic profile of the survey participants allows for several conclusions to be drawn:

- the country's age and sex pyramid of the adult population (18+) has a stationary type. The age cohort of 18-24 years is 1.5 times smaller than the age cohort of 25-34 years, the latter being the most numerous (25%);
- women outnumber men in the pre-retirement (55-64 years old) and retirement age groups (over 64 years old);
- 60% of survey participants are married; 24% are single / unmarried. Women are more likely than men to be at risk of losing / changing their family status. Widows and divorcees account for 22 per cent of the female participants in the survey;
- women are less likely than men to have a single-person household. At the same time, women more often than men have minor children among the household members;
- 8 out of 10 respondents have professional education. At the same time, the following trend persists: there are more women than men who have higher education and there are more men than women who have vocational training;
- among women, the employment rate is lower than among men (64% vs. 75%), and the percentage of broadly defined dependants is higher (29% vs. 18%);
- the total share of respondents with low and below average incomes is 48%: 50% among women vs. 45% among men.

V. Study Findings

1. AWARENESS OF COVID-19

Awareness of COVID-19 is essential to the pandemic response and should be considered as a priority measure to prevent the spread of COVID-19. An understanding of the risks posed by the virus, recommended prevention measures and mitigation strategies for accompanying challenges can lead individuals to adopt prevention and control measures at home and in their communities by averting the spread of the virus.

According to the survey results, the main sources of information about COVID-19 for the population are the Internet and social media: 52% of respondents, or one in two, indicated these sources (see Table 1.1).

The second most popular source of information is the traditional media: television, radio and newspapers. 25% of the survey participants, or every fourth respondent, indicated traditional media as their main source of information.

It should be noted that the specific nature of the given situation led to virtual exclusion from the list of the main sources of information such sources as messengers and texting applications (Telegram, Viber, WhatsApp) (8%) and family / personal networks (3%), which under normal circumstances have a significant impact on shaping the information field around a person.

Official sources of information, in the form of government websites, were cited by 8% of survey participants as the main sources of information, while announcements/presentations by representatives of government agencies amounted to only 2%.

In addition, according to the survey results, healthcare institutions and civil society organizations are not considered as important sources of information about COVID-19 (1% and 0% respectively).

The analysis of the survey results did not reveal any significant gender differences in the preferences of sources of information. Both men and women mentioned Internet resources as the main source of information, and traditional mass media as the second.

It is noteworthy that in rural areas, 27% of respondents give preference to traditional mass media, compared to 23% in urban areas. The urban population takes information from official sources more seriously: the city residents are twice as likely as rural residents (10% vs. 4%) to name government websites as the main source of information about COVID-19.

Table 1.1 - Ranking of major sources of information on COVID-19, including information on threats posed by the virus, recommended prevention measures, mitigation strategies for dealing with related challenges, disaggregated by gender, age and location (%)

	Gender		Age					Location		All Respondents
	Men	Women	18-34	35-44	45-54	55-64	65+	Urban Area	Rural Area	
1. Internet and social media (Facebook, Instagram, etc.)	53%	52%	65%	58%	48%	41%	16%	52%	53%	52%
2. Radio/ TV / Newspapers	25%	24%	9%	17%	26%	42%	72%	23%	27%	25%
3. Messengers and SMS mailings (Telegram, Viber, WhatsApp)	8%	8%	10%	9%	11%	6%	2%	8%	9%	8%
4. Official government websites	8%	8%	10%	9%	7%	5%	2%	10%	4%	8%

5. Immediate personal networks, including family and friends	2%	3%	2%	3%	2%	3%	6%	3%	3%	3%
6. Announcements / presentations by government officials	2%	3%	2%	3%	4%	2%	1%	2%	3%	2%
7. Healthcare centers / family doctor	1%	1%	1%	0%	1%	1%	0%	1%	0%	1%
8. NGOs/ civil society organizations	0%	0%	0%	0%	0%	0%	0%	0%		0%
Other	0%	0%	0%	1%	0%	0%	0%	0%	0%	0%
I know nothing about COVID-19	1%	1%	1%	0%	0%	1%	1%	1%	1%	1%

As expected, the choice of the main source of information about COVID-19 depends on age. The younger the respondents, the more often they use the Internet and social networks, messengers, and the older they are, the more often they prefer traditional media and personal communication. Thus, in the group of 18-34 years old the share of users of Internet sources is 65%, and in the group older than 65 – 16%. Traditional mass media are the main source used by 9% in the group of 18-34 years old and 72% in the group older than 65. The group of 55-64 years of age gives equal preference to Internet sources and traditional mass media (41% and 42%).

When assessing information on COVID-19, there are some differences depending on gender and age of the survey participants. Women slightly more often (by 5%) than men agree with the statement that the information received is understandable, timely and helpful in navigating the situation – 67% versus 62% respectively (*see Table 1.2*). While the difference is not significant, the share of those who consider the received information to be either delayed (12%) or incomprehensible and contradictory is higher among men (20%). Thus, among men, the cumulative number of those who are dissatisfied with the quality of information on COVID-19 is 32 per cent; among women, the same indicator is at 27 per cent.

It is evident that the older the participant is, the more often he or she points out that the information on COVID-19 is not delivered in a timely manner. For example, in the age group over 65, this opinion is shared by 18 per cent, with the average being 11 per cent, while in the 18-34 age group it is only 7 per cent. At the same time, it is the respondents aged 55-64 who are most critical towards information on COVID-19. In this group, almost one in five (21 percent) believes that the information on COVID-19 is contradictory, obstructing understanding and decision-making.

The survey also showed that the larger the number of people in the respondent's household, the more dissatisfied s/he is with the available information about COVID-19.

Table 1.2 - Perception of the quality of information on COVID-19 by gender, age and household size (%)

	Gender		**Age**					**Household size**			**All respondents**
	Men	**Women**	**18-34**	**35-44**	**45-54**	**55-64**	**65+**	**1 person**	**2 people**	**3 and more people**	
The information is clear and timely, helps me to respond to the situation in a timely manner	62%	67%	67%	68%	62%	57%	61%	68%	71%	60%	64%

The information is clear, but it's arriving too late for a timely response	12%	10%	7%	9%	13%	14%	18%	9%	7%	12%	11%
The information is unclear, contradictory, and makes it difficult to understand and respond to the situation in a timely manner	20%	17%	19%	17%	19%	21%	13%	17%	16%	20%	18%
Difficult to answer	7%	7%	7%	5%	6%	9%	8%	6%	6%	8%	7%

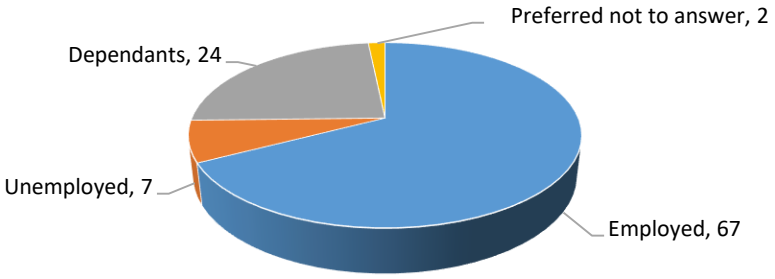
2. EMPLOYMENT SECURITY

2.1. Employment before and during COVID-19

As noted above (see Profile of Survey Participants), before the spread of COVID-19, 67% (n=1484) of survey participants had an active employment status – i.e. were employed. The share of unemployed persons is 7% (n=159), and conditional dependants – 24% (n=523). 2% refused to indicate their employment status.

Among women, the employment rate is slightly lower: 62% of respondents said that they had been employed before the coronavirus began to spread. Among the male respondents, 74% were employed before COVID-19.

Figure 2.1 – Employment Status, (% of total number of respondents)



Every second respondent (52%; n=1149) identified themselves as salaried employees. Among women, this number was 47 per cent while among men, it reached 58 per cent. This group of respondents most commonly indicated their income level to be "average" (55%).

Only 10% (n=234) of the survey participants identified themselves as business owners/free-lancers, among them: 2% (n=53) indicated they were business owners with hired employees (employers) and 8% (n=181) - owned a business without hired employees (self-employed). This group is equally represented by both men and women. Respondents aged 35-44 years (11.6%) were more often included in this group.

Approximately one in three respondents (37%) had no employment status before the outbreak of COVID-19. Of these, only 7% (n=159) indicated that they were temporarily unemployed, in search of work (unemployed).

The total share of unemployed and dependents was 40% among women and 31% among men. This disproportion is attributable to the higher percentage of women among those who reached the retirement age (16% vs. 10% among men), as well as among those who have never

been employed or sought employment (conventionally referred to as "housewives", 7% vs. 2% among men).

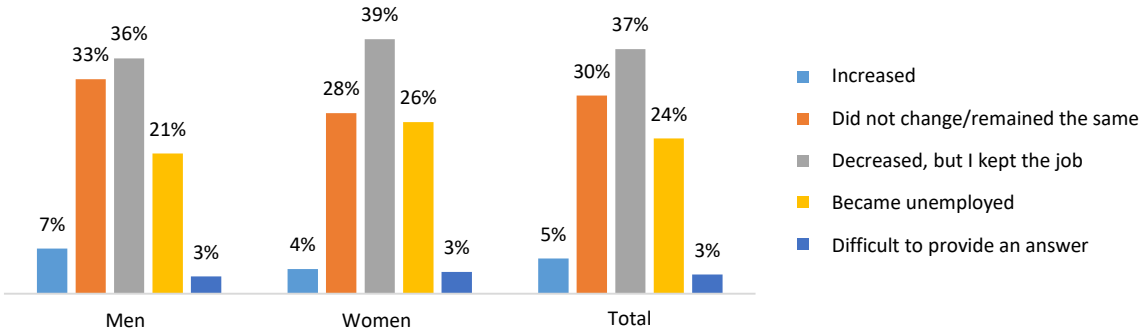
Table 2.1 - Employment status during the standard work-week before COVID-19, by gender (%)

	Employment Status	Men	Women	Total
Employed	1. Salaried employee (worked for another person / company / household)	**58%**	47%	52%
	2. Employer (I had my own business / worked as freelancer and hired other people)	3%	2%	2%
	3. Self-employed (I had my own business / worked as freelancer, but I didn't hire other people).	9%	8%	8%
	4. Family business worker (I helped (free of charge) with family business)	4%	2%	3%
	5. Parental leave	---	3%	2%
Unemployed	6. Temporary unemployed (I was not employed, but am looking for a job and ready to start working)	7%	7%	7%
Dependant	7. Unemployed (I was not working or looking for a job and could not work)	2%	**7%**	5%
	8. Reached the retirement age (retiree)	10%	**16%**	13%
	9. Student (I have not been working because I am in a full-time training program)	4%	4%	4%
	10. Disability pensioner (I was not working because I have a chronic illness, injury, disability)	2%	2%	2%
No answer		2%	2%	2%

On March 16, 2020, a state of emergency was declared in Kazakhstan in response to the registered cases of the coronavirus, which led to partial or complete isolation of citizens at their place of residence. According to the survey, only one in three respondents (30%) out of those who prior to COVID-19 had been employed (n=1,383, excluding family business workers and women on maternity leave) confirmed that the number of working hours has not changed, i.e. they continue to perform their work functions in full. Another 5 per cent in this group said that the number of working hours increased. A comparative analysis by gender shows that the employment retention rate (the cumulative percentage of answers "increased" and "remained unchanged") at the pre-quarantine level is less prevalent among women than among men - 32% versus 40% (*see Figure 2.2*).

37% of those who had been employed prior to COVID-19 said that they had retained their job, but that the number of working hours had decreased, while 24% said that they had lost their job after COVID-19 began to spread.

Figure 2.2 - Changes in the number of paid working hours after the beginning of the COVID-19 period, by gender (% of the number of employed people prior to COVID-19 (n=1383))



26% of previously employed women lost their jobs. These are more often to be young women aged 18-34, residing in urban areas, married, with or without children. Among employed men, the share of those who lost their jobs was 21 per cent. These are more often young men aged 18-34, urban dwellers married but without children.

If we compare the profiles of those who lost their jobs by gender, it is evident that in the age group of 45-54, there are more newly unemployed among women than among men. Married and widowed/divorced women also experience a higher unemployment rate than men (*see Table 2.2*).

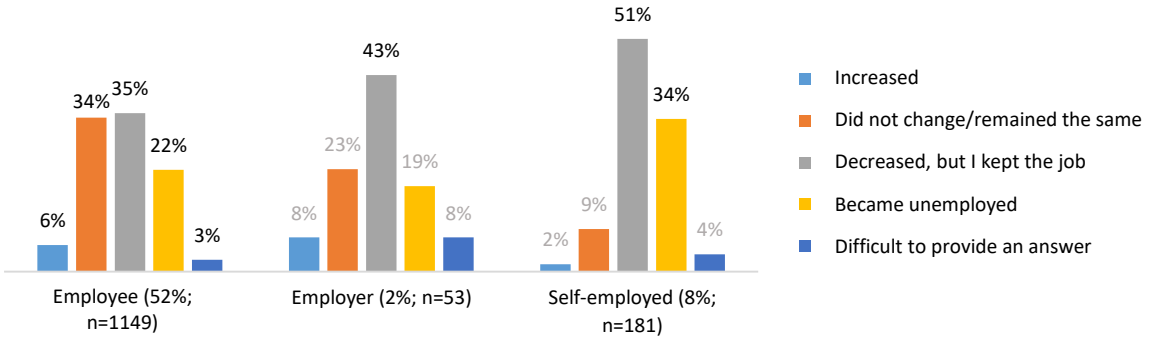
Table 2.2 - Socio-demographic profile of people who lost their jobs, by gender (%)

	Features	**Men (21%, n=155)**	**Women (26%, n=174)**
Age	18-34	52%	47%
	35-44	24%	22%
	45-54	15%	20%
	55-64	10%	11%
	65+	---	---
Type of Residential Area	Urban area	63%	65%
	Rural area	37%	35%
Family Status	Single / Not married	36%	22%
	Married / shared household	54%	60%
	Married but residing separately	1%	2%
	Widowed / Divorced	9%	16%
Household Type	With children	39%	45%
	Without children	61%	55%

The survey results analysis of the employment status shows that freelancers (self-employed) were the most vulnerable in terms of ability to keep their paid employment. Only 11% of respondents in this group managed to keep their employment at the pre-quarantine level while 51% reported reduction in paid work hours and 34% said they had lost their employment. These changes affected self-employed men and women equally. Self-employed people were more likely to lose their jobs in urban areas, while in rural areas they experienced a decrease in the number of work hours.

Among salaried employees, 35 percent started to spend less time on paid work, and 22 percent, or one in five, said they lost their jobs. Women were more affected here. In urban areas, salaried employees were more likely to keep their jobs but lose part of their income, while in rural areas, they were more likely to lose their jobs.

Figure 2.3 - Changes in the number of hours devoted to paid work after the beginning of the spread of COVID-19 by employment status (% of the number of employed persons before COVID-19 (n=1383))

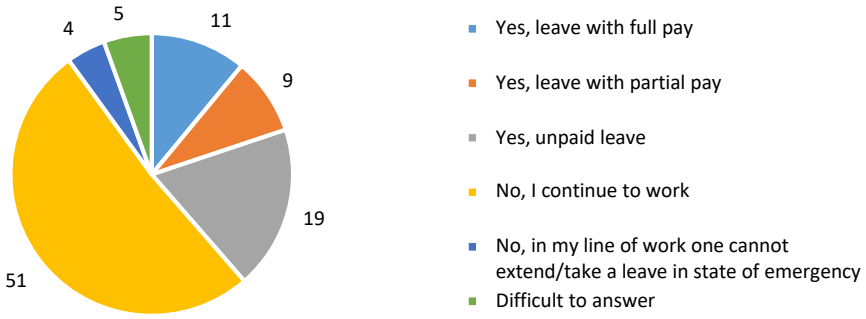


2.2. Situation of salaried employees under COVID-19 conditions

The introduction of the state of emergency and quarantine measures, which entailed the shutdown of manufacturing facilities and businesses for the period of quarantine, posed two main challenges for businesses: to maintain the financial stability and to retain the labor force. According to the survey results, 39% of employees were put on leave after the announcement of the emergency regime, and 56% continue to work and receive income from paid work. 5% found it difficult or declined to answer the question. It should be noted that among men aged 18-34, there are more employees who continue to work than among women. There are more women than men who continue to work in the age group of 35 years old or over. However, women with children have a greater proportion of quarantine leaves than women without children. Among the latter, there is a higher proportion of those who continue to work.

Among those who were sent on leave, only one third (11%) are on fully paid leave, while the remaining two thirds have lost all or part of their income from employment. Men aged 45-54 years and 55-64 years were the most likely to be on unpaid leave. Among women, 18-34 years of age and 55-64 years of age were more likely to be on unpaid leave. Considering the existing issue of employment of persons over 45 years of age in the country, there is a high probability that these respondents will not be (re)employed after quarantine.

Figure 2.4 - Since the start of COVID-19, have you been put on leave? (% of employees (52%))



Among those who continue to work under COVID-19 conditions, 44% have moved to telecommuting; 51% continue to work outside their home. The survey showed that only 5 percent of survey respondents continue to work from home as they have done in the past.

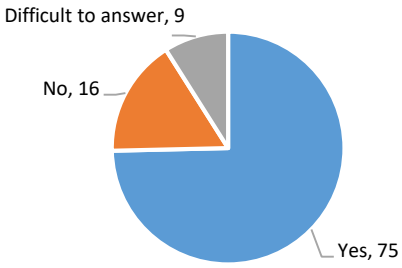
The percentage of women forced to work from home is higher than the percentage of women who continue to work outside the home (56% vs. 40%). Moreover, those women who have two or more children in the household, more often than women without children, work outside the home. Women without children and with only 1 child were more often moved to a remote work arrangement. The opposite situation is observed among men: the share of men who continue working outside the home is higher than the share of men who switched to remote work (60% vs. 35%).

Table 2.3 – Since the spread of COVID-19, has your normal place of work changed? (% of those who continue to work (55.9 %))

Place of work	Men	Women	All respondents
Yes, I used to work outside the home, and now I work at home, remotely	35%	**56%**	44%
No, I used to work outside the home and continue to work outside the home	**60%**	40%	51%
No, I still work from home, as before	5%	5%	5%

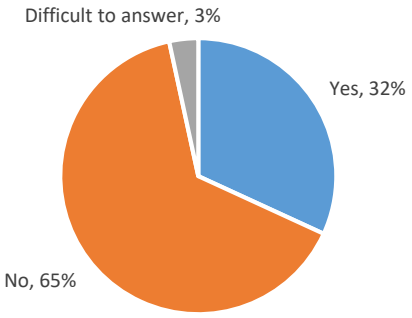
Despite the changed conditions of employment, 75 per cent of employees replied affirmatively to the question that their employer was paying pension contributions on their behalf. This group of employees can be considered formally employed. 16% gave a negative answer – they are informally employed. Most often these are young, unmarried workers between the ages of 18 and 34 who are currently on unpaid leave. Among those informally employed, men and women are equally represented.

Figure 2.5 – Does your employer pay pension contributions on your behalf? (% of those who continue to work (52%))



According to the survey results, 32% of employees took the opportunity to apply for financial assistance from the state or local authorities. It is worth reminding that, as part of the support to citizens in Kazakhstan who have lost their jobs during the emergency period, entrepreneurs (IE, microbusinesses), working legally and individuals who found themselves in a difficult financial situation under the COVID-19 conditions and filed applications, have been paid an amount of 42,500 tenge for two months to maintain the welfare. The main recipients in this group were employees who were sent on partially or fully unpaid leave (35% and 57% respectively). Among women on unpaid leave, 62% received financial assistance from the state, and among men – 54%.

Figure 2.6 – Do you receive any financial assistance from the state or local authorities as COVID-19 began to spread?, (% of those who continue to work (52%))



In general, the survey showed that employers have an interest in retaining their work teams and, where possible, they try to fulfill their obligations to employees in the form of vacation allowances, pension contributions or organizing conditions for their employees to work remotely. The proportion of employees who have been sent on partly or fully unpaid leave under COVID-19 conditions, thereby completely or partially losing their income from employment, according to the survey, is 28% of the number of employees. At the same time, almost one in three of the respondents to the survey used financial support from the state.

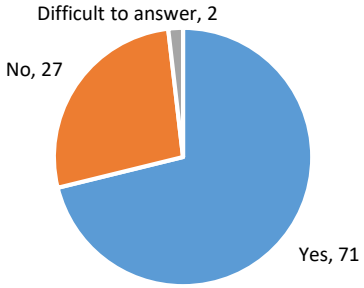
The survey also showed that there are more women than men among salaried employees forced to work from home (56% vs. 44% men). Men prevail in the group of those who continue working outside the home (66% vs. 34% of women). However, those women who are burdened with family and children are more likely to work outside the home.

The survey also showed that there are more women than men among salaried employees forced to work from home (56% vs. 44% men). Men prevail in the group of those who continue working outside the home (66% vs. 34% of women). However, those women who are burdened with family and children are more likely to work outside the home.

2.3. Situation of employers and self-employed under COVID-19

As noted above, self-employed Kazakhstanis turned out to be more vulnerable in the COVID-19 environment in terms of occupational safety. The survey showed that not all employers / self-employed people carry out their business / provide services on a legal basis: one in four businesses (27%) does not have official registration. Among unregistered businesses, the share of female entrepreneurship is 43%, male – 57%. Such a business in crisis conditions does not have the legal right to seek support and protection from the state.

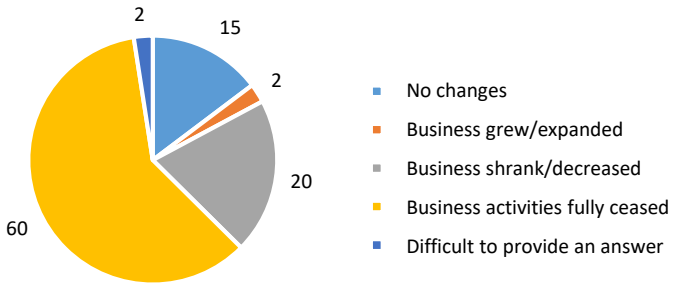
Figure 2.7 – Is your business officially registered (FE, LLP, patent, license, etc.)? (% of the number of employers/self-employed (10%))



According to the survey, six out of ten employers (60%) had to completely stop their business after COVID-19 began to spread. This has affected rural entrepreneurs and women's businesses to a greater extent.

The business of 37 per cent of employers / self-employed continues to operate under COVID-19, with 20% noting a decline in business, and only 17% managing to maintain a pre-quarantine level of income.

Figure 2.7 – What changes have occurred to your business since COVID-19 started to spread?, (% of the number of employers / self-employed (10%))



According to the survey results, 54 per cent of employers / self-employed took the opportunity and received financial assistance from the state or local authorities.

In general, the survey has shown that under COVID-19, employers / self-employed have been more adversely affected than hired workers, and their welfare is dependent on government support.

3. RESOURCES TO SUPPORT THE HOUSEHOLD

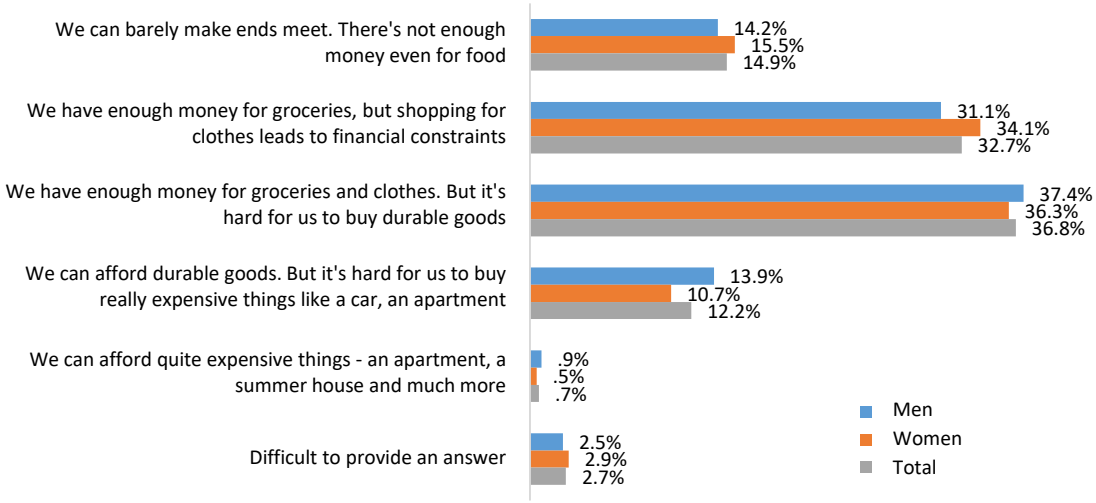
3.1. Internal (own) household support resources

As noted above (see Sociodemographic Profile of Respondents, p.11), 47.6 per cent of respondents can be attributed to low-income groups of the population (of which 14.9% are poor, i.e. those who do not have enough money even for food). The distribution by place of residence is approximately equal: 47.8% live in the city and 47.3% in the village. There is a noticeable difference by gender: 45.3% of men were classified as low-income (14.2% of men considered themselves poor), while low-income women constitute 49.6% (15.5% of poor women).

The lower middle layer – those who have enough money for food and clothing, but it is difficult for them to buy durable goods (most frequently large household appliances) – is represented by 36.8 per cent of respondents (among women – 36.3%, among men – 37.4%). Medium and high-income groups do not exceed 15% (among men – 14.8%, among women – 11.2%).

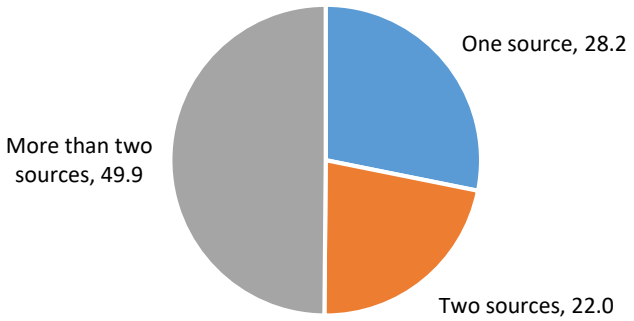
In other words, the survey revealed slight differences between women and men in the self-assessment of consumer potential: women are more likely than men to classify themselves as low-income groups and less likely to classify themselves as middle and upper-middle income groups.

Figure 3.1 – Which of the following population groups would you rather identify with? (% of the total number of respondents)



In general, the distribution of survey participants by the number of sources of income in a household indicates that one in two households has more than two sources of income to support their well-being. One fifth of households (22%) rely on two sources of income. Every fourth household (28.2%) has only one source of income. Most often, these are households in rural areas, which consist of three or more people, with minor children.

Figure 3.2 – Distribution of population by the number of sources of income (% of the total number of respondents)



But how sustainable are household income sources? The study found that the most common, as well as the most sustainable ("unchanged"), resources to support households are: pensions and other social benefits; support from family / friends in the same country; and income / wages from paid work (the "not applicable to my situation" response rates for these answer options were 56.2%, 55.9% and 30.9%, respectively). Other listed support resources are less common, and "money received from people living abroad" is the least used (for 84.3% of respondents this is not applicable to their situation).

Under the quarantine conditions, according to the answers of the survey participants, the most significant increase is observed in such support resources as social support (pension and other social benefits) ("increased" – 6.8%) and support from family / friends in the same country (money, food, etc.) ("increased" – 7.4%).

Revenues from productive activities tend to decrease. According to the survey results, the share of those whose income from paid work has decreased is 30.7%, or almost one in three. 18.5% indicated a decrease in income from self-employment. 9.6 per cent of respondents lost income from farming activities.

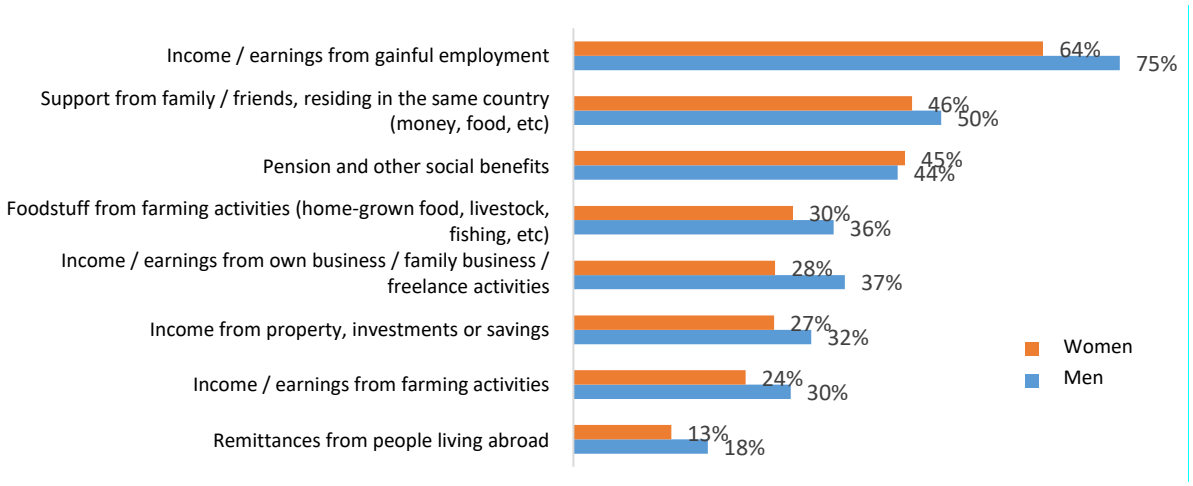
Revenues from property or savings, as the survey shows, are not widespread. 70.2% of the survey participants say that this resource is not applicable to their household. Among those who use this resource, almost half indicate a decrease in income (13%).

Table 3.1 – Assess how the following resources to support your household have changed as a result of the spread of COVID-19? (% of the total number of respondents)

Support resources	Increased	Remained unchanged	Decreased	Not applicable to my situation
Income / earnings from farming activities	1.1	15.7	9.6	73.6
Income / earnings from own business / family business / freelance activities	1.4	12.2	18.5	67.9
Income / earnings from paid work	1.0	37.4	30.7	30.9
Income from property, investments or savings	1.1	15.7	13.0	70.2
Pension and other social benefits	6.8	31.3	5.7	56.2
Food products from own farm, cattle breeding or fishing	2.0	22.8	7.8	67.4
Money received from people living abroad	1.2	10.0	4.5	84.3
Support from family / friends located in the same country (money, food, etc.)	7.4	25.5	11.2	55.9

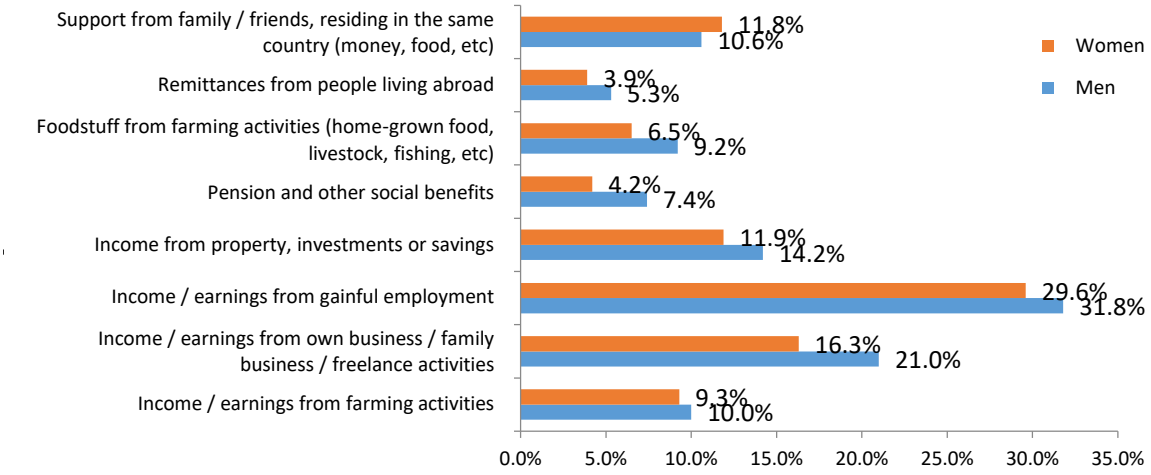
The survey has shown that the household dependency rating on a particular support resource does not change according to the gender of the respondent. The difference is observed only in the completeness of indicators: men were more likely to indicate the presence of a particular resource in the structure of household income.

Figure 3.3 – Dependence of households on support resources by gender (%, total share of choices "decreased", "remained unchanged", "increased")



The diagram below shows the distribution of “support resources decreased” responses by gender. It is noticeable that women are more optimistic in their estimates, which means that women are less likely than men to believe that these support resources have decreased. Some exceptions are results for a resource such as family / friends support, for which women are somewhat more likely than men to report a decrease in this resource.

Figure 3.4 – Assess how the following resources to support your household have changed as a result of the spread of COVID-19? (estimates taken for the option "decreased")



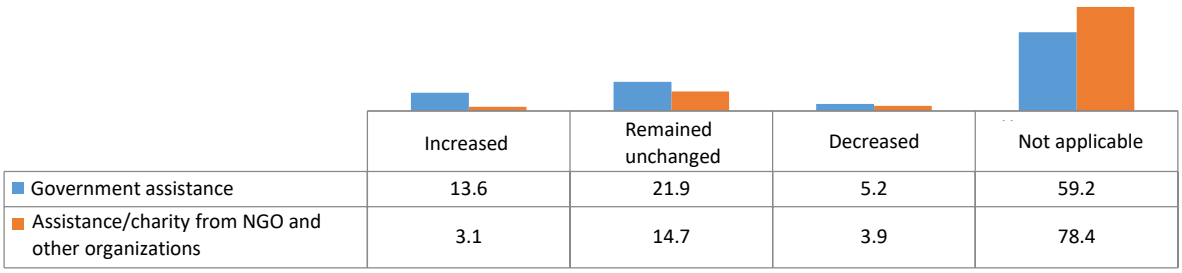
Thus, the most significant negative changes were in the support resource such as income / earnings from paid work: almost a third of respondents indicated its decrease and only 1 per cent of respondents indicated an increase in it during the COVID-19 period. At the same time, estimates of such a common resource as family / friends’ support have changed in a variety of ways: a significant proportion of respondents said that family / friends’ support has both improved and deteriorated, and remained unchanged. At the same time, women and men assess the status of household support resources differently during the quarantine: men are more likely to believe that support resources have decreased, and this conclusion is most true for income / earnings from own business / freelance activities (difference in response of men and women is 4.7%).

3.2. Inclusion in the social support system under COVID-19 conditions

The survey showed that state support for the population is more widespread (involvement – 40%), compared to the support / charity of NGOs and other organizations (involvement – 22%).

With regard to assistance from NGOs and other similar organizations, respondents were more likely to choose the answer “remained unchanged” (14.7%).

Figure 3.5 – Assess how the following resources to support your household have changed as a result of the spread of COVID-19? (% of the total number of respondents)



	Increased	Remained unchanged	Decreased	Not applicable
Government assistance	13.6	21.9	5.2	59.2
Assistance/charity from NGO and other organizations	3.1	14.7	3.9	78.4

In general, the analysis of data through the prism of socio-demographic characteristics showed that the system of both state and non-state support is more involving men, survey participants from the age categories 18-34 and 35-44 years old, urban dwellers, households consisting of 1 or 2 persons, without children.

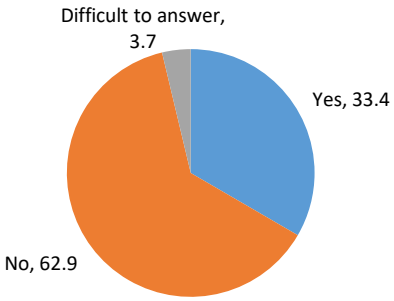
Table 3.2 – Involvement in the system of state and non-state support received since the beginning of the spread of COVID-19, depending on socio-demographic indicators (%)

		Involvement in the state support system	**Involvement in the non-governmental sector support system**
Gender	Men	42%	25%
	Women	39%	19%
Age	18-34	50%	29%
	35-44	47%	24%
	45-54	35%	15%
	55-64	29%	12%
	65+	23%	13%
Area of residence	City	43%	25%
	Village	37%	16%
Household size	1 person	42%	30%
	2 persons	55%	37%
	3 and more persons	35%	14%
Household type	Households with children	40%	17%
	Households without children	42%	26%

One in three respondents reported that they had received financial assistance from the state / local authorities since the beginning of the spread of COVID-19. At the same time, city dwellers (35%) were somewhat more likely to receive state aid than rural dwellers (31%); respondents aged 18-34 years (38%) and 35-44 years (41%), regardless of gender of respondents.

The majority (62.9%) said that since the beginning of the spread of COVID-19, they had not received assistance from the state.

Figure 3.6 – Do you receive any financial assistance from the state or local authorities since the beginning of the spread of COVID-19? (% of the total number of respondents)



What kind of assistance (other than financial) have respondents received from various entities since the start of the spread of COVID-19? The vast majority (over 90%) have not received any other assistance from the government, charity foundations / parties / NGOs or businesses. The total share of survey participants who received in-kind assistance from different subjects is 8.5%. 6.2 per cent said they had received assistance from the state; 4.8 per cent – from the civil sector; another 3.4 per cent – from businesses. Most often, social baskets consisted of food and prevention means (gloves, masks, disinfectants, etc.).

Figure 3.7 – Share of in-kind assistance recipients (food, hygiene products, etc.) (% of the total number of respondents)

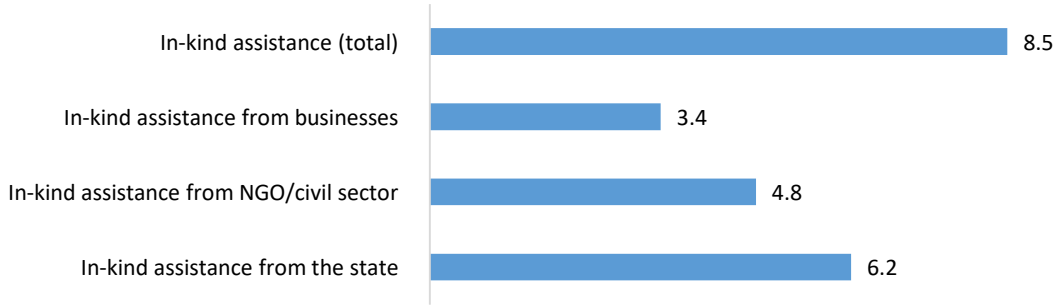


Table 3.3 – The share of recipients of in-kind assistance (food, hygiene products, etc.) by position broken down by aid subjects (% of the total number of respondents)

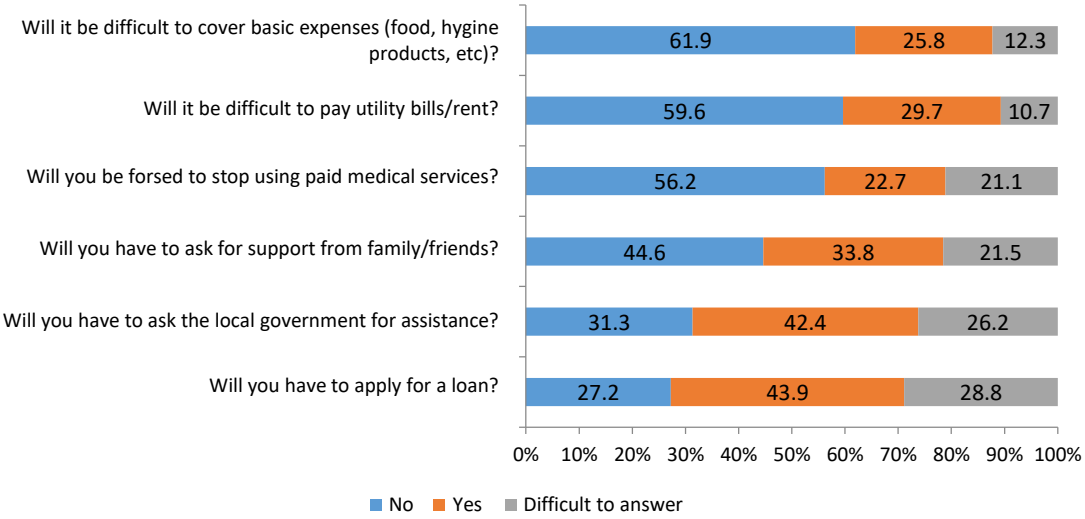
	Support from the state or local authorities	**Support from charitable foundations, NGOs, parties, or other NCOs**	**Support from business**
Food products	3.4	3.0	1.4
Means of prevention (gloves, masks, disinfectants, etc.)	2.5	1.4	1.5
Personal care products (soap, baby diapers, etc.)	0.3	0.4	0.5
Did not receive help	91.6	93.9	95.0
Difficult to answer	2.3	1.4	1.7

3.3. Risks to household financial security in COVID-19 environment

If the restrictive measures related to the spread of COVID-19 continue, then, in terms of financial behavior, respondents will start saving, i.e. trying to optimize costs. This will have an impact on basic costs (food and hygiene products), which will be difficult to cover for 61.9 per cent of respondents, 59.6% will have difficulty paying utility bills, 56.2% will have to stop applying for paid medical services / assistance. A somewhat less frequent consequence of the continued

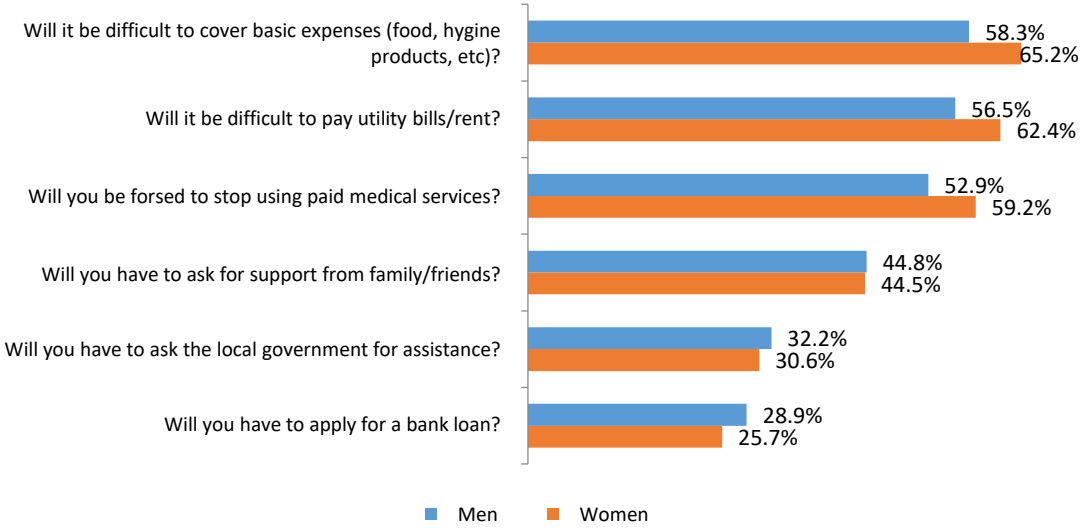
quarantine will be to seek external assistance. Thus, 44.5 per cent of respondents will have to ask for help from friends and relatives, 31.3% will have to apply to local authorities and only one in four (27.2%) will try to take a loan.

Figure 3.8 – If the restrictive measures related to the spread of COVID-19 continue, how is it likely to affect your financial situation...? (% of the total number of respondents)



From a gender perspective, the survey revealed the following correlation: from the point of view of women, if the restrictive measures continue, they will face the problem of optimizing / reducing their internal expenses, men will more often resort to external (outside the household) financial instruments, such as loans and social assistance.

Figure 3.9 – If the restrictive measures related to the spread of COVID-19 continue, how is it likely to affect your financial situation...? (sorted by option "yes")

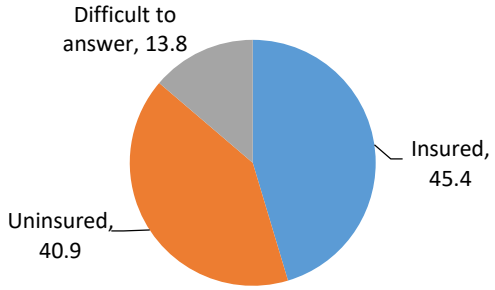


Thus, according to the results of the study, a significant part of the respondents (more than half), in case the restrictive measures related to the spread of COVID-19 continue, will have problems accessing paid medical services / assistance, paying utility bills / rentals and covering basic expenses for food and hygiene products. At the same time, a smaller number of respondents (45-27%) will resort to external assistance (relatives / friends, government agencies, credit).

4. ACCESS TO BASIC SERVICES

The survey revealed that 45.4 per cent of the respondents had health insurance (the most common were city dwellers (46.8%); women (47.2%); respondents aged 45-54 years (48.8%) and 55-64 years (51.2%); middle and upper middle-income respondents). Its absence was reported by 40.9% of respondents (most frequently by rural residents (46.1%); men (43.6%); respondents aged 18-24 years (47.9%); and respondents with low incomes (57.6% and 49.7%). One in seven survey participants found it difficult to answer (urban dwellers; women; 18-24 years old; middle-income level).

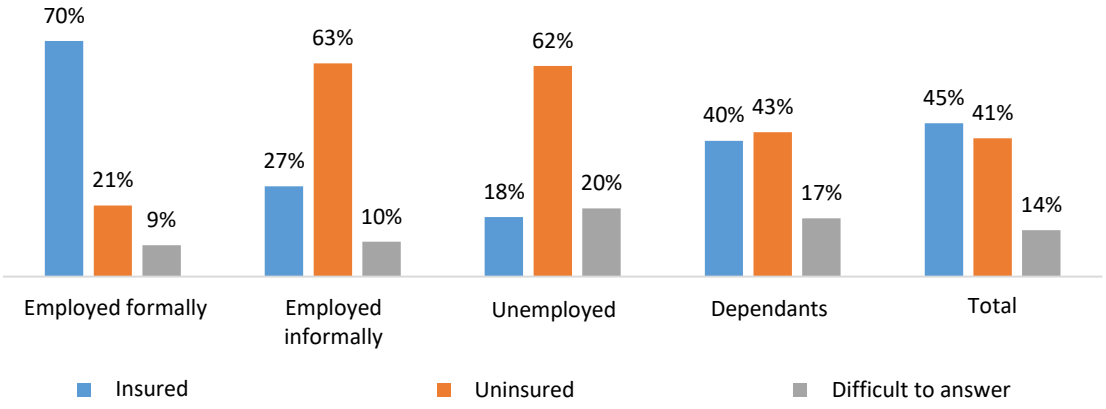
Figure 4.1 – Do you currently have any health insurance or health care plan? (% of the total number of respondents)



Despite the fact that the shares of those who have and those who do not have health insurance are almost equal, analysis of the data by employment shows that among the formally employed 7 out of 10 (70%) have health insurance. A high proportion of dependents with health insurance suggests that employers are actively using family health insurance programs.

Among informally employed workers and unemployed persons, the share of those who have health insurance is three times less, amounting to 27% and 18% respectively. This indicates that medical insurance in Kazakhstan remains part of the corporate social package and is stimulating in nature rather than a conscious decision by a person to take care of his or her health and the health of his / her family members.

Figure 4.2 – Do you currently have any health insurance or health care plan? (% by employment)



During the spread of COVID-19, the most demanded basic services were the purchase of food products, the purchase of medical protective equipment, masks, gloves, etc., sanitary and

hygiene products (soap, feminine hygiene products, toiletries, etc.) and water supply services. Nine out of 10 respondents said that they had access and used these services, the response rate "did not use these services" was in the range of 6.2% -10.6%. A little less frequently, the respondents used public transport services, respondents used public transport and medical services / assistance for themselves and / or their family members (the response rate "did not use these services" was 25.7% and 31.4%, respectively). Less than half of the respondents used social services / social assistance for themselves and / or family members.

At the same time, the respondents faced the greatest difficulties during the quarantine when accessing health services and goods, namely, when purchasing medical protective equipment, masks, gloves, etc. (30% – great difficulties + 39.9% – some difficulties) and medical services / assistance for themselves and / or family members (15.6% – great difficulties + 27.7% – some difficulties). The second position in terms of inaccessibility can be placed on the purchase of food products (10.5% – great difficulties + 42.1% – some difficulties). In the third place are public transport services (35.8% – great difficulties + 20% – some difficulties). This is followed by the acquisition of hygiene products (9.7% – great difficulties + 26.4% – some difficulties).

Table 4.1 – As a result of the spread of COVID-19, have you personally encountered difficulties in accessing basic services: (% of the total number of respondents)

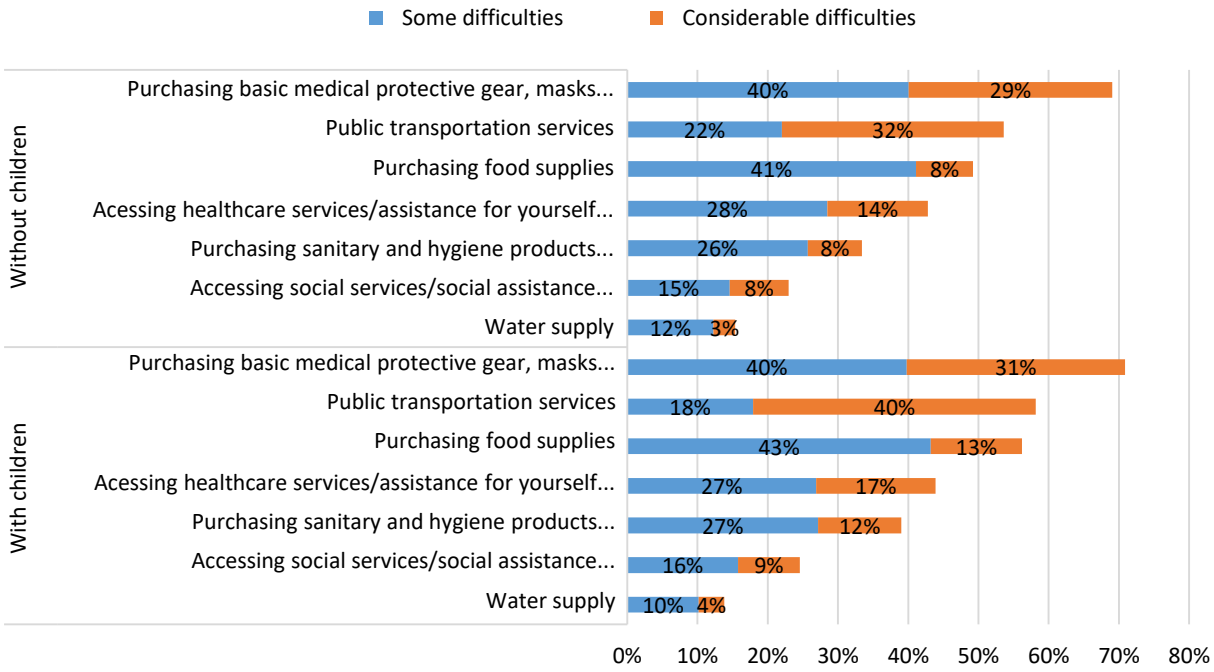
Basic services	Great difficulties	Some difficulties	No problems	Did not use the services
Public transport services	35.8	20.0	18.4	25.7
Purchase of medical protective equipment, masks, gloves, etc.	30.0	39.9	23.8	6.3
Medical services / assistance for themselves and / or family members	15.6	27.7	25.3	31.4
Purchase of food	10.5	42.1	41.1	6.2
Purchase of hygiene products (soap, women's hygiene products, toiletries, etc.)	9.7	26.4	56.6	7.3
Social services / social assistance services for themselves and / or family members	8.6	15.2	21.6	54.6
Water supply	3.4	11.3	74.8	10.6

From a gender perspective, it is noticeable that women and men alike often reported difficulties in accessing basic services such as medical supplies, masks, gloves, etc. during the spread of COVID-19. However, men were slightly more likely than women to talk about difficulties in accessing food, sanitary and hygiene products, social services / social assistance and public transport. Women more often than men noted difficulties in accessing water supply.

Figure 4.3 – As a result of the spread of COVID-19, have you personally encountered difficulties in accessing basic services: (in the diagram, the sum of the responses shows "great difficulties" and "some difficulties" by gender)

In addition, data analysis has shown that families with children are more likely to face greater difficulties in accessing basic services. This is particularly true for food and sanitation, while access to health and public transport services is also more difficult. The most vulnerable are families with children under 17 years of age raised by one parent.

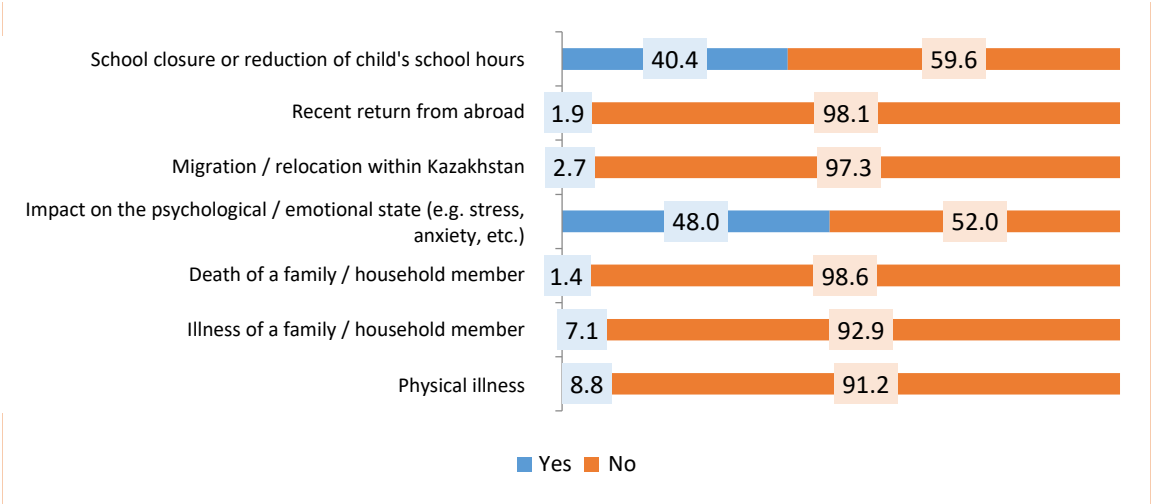
Figure 4.4 – As a result of the spread of COVID-19, have you personally encountered difficulties in accessing basic services: (in the diagram, the sum of the responses shows "great difficulties" and "some difficulties" by gender)



During the spread of COVID-19, the respondents were most likely to encounter two types of problems. The first was the closure or reduction of a child's schooling (introduction of distance learning) (40.4 per cent; among women – 42.9 per cent and among men – 37.7 per cent). The second was the impact of COVID-19 on the psychological / emotional state (48%; among women – 51.9%; among men – 43.6%). In addition, a relatively high proportion of those surveyed had encountered various kinds of diseases: physical illness (8.8%; among women - 10.9%; among men – 6.5%) and family / household disease (7.1%).

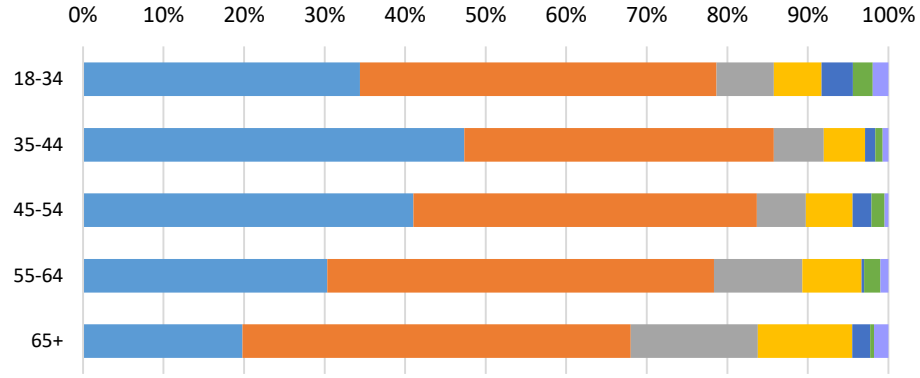
The minimum number of respondents encountered migration / relocation to another place within the borders of Kazakhstan, recent arrival from abroad, and death of a family / household member (1-3%).

Figure 4.5 – As a result of the spread of COVID-19, did you personally experience any of the following: (% of the total number of respondents)



The analysis of age data showed that Kazakhstani people aged 45-54 (51%) experience the greatest psycho-emotional pressure. Most often, Kazakhstanis aged 35-44 years (59%) are under pressure from closing or reducing school activities. People over 65 years of age are more likely to suffer from their own physical illnesses or illnesses of family members.

Figure 4.6 – Have you personally experienced any of the following as a result of the spread of COVID-19: (% by age)



	65+	55-64	45-54	35-44	18-34
School closure or reduction of child's school hours	20%	28%	49%	59%	37%
Impact on the psychological / emotional state	49%	44%	51%	48%	48%
Physical illness	16%	10%	7%	8%	8%
Illness of a family / household member	12%	7%	7%	6%	6%
Migration / relocation within Kazakhstan	2%	0%	3%	2%	4%
Recent return from abroad	0%	2%	2%	1%	3%
Death of a family/household member	2%	1%	1%	1%	2%

Summarizing respondents' answers on access to basic services, we can say the following:

- 45% confirmed the availability of health insurance. At the same time, most often the owners of insurance are women, respondents of older age groups (from 45 years), formally employed, living in cities and having a relatively high consumer status;

- During the spread of COVID-19, survey participants were most likely to encounter difficulties in accessing medical services and goods and food products. However, men reported more problems with access to basic services than women did. And the most vulnerable groups were families with children;
- most frequently (40% and above) among the difficulties of quarantine experienced, the respondents mentioned the closure or reduction of classes at the child's school and the impact on the psychological / emotional state (stress, anxiety).

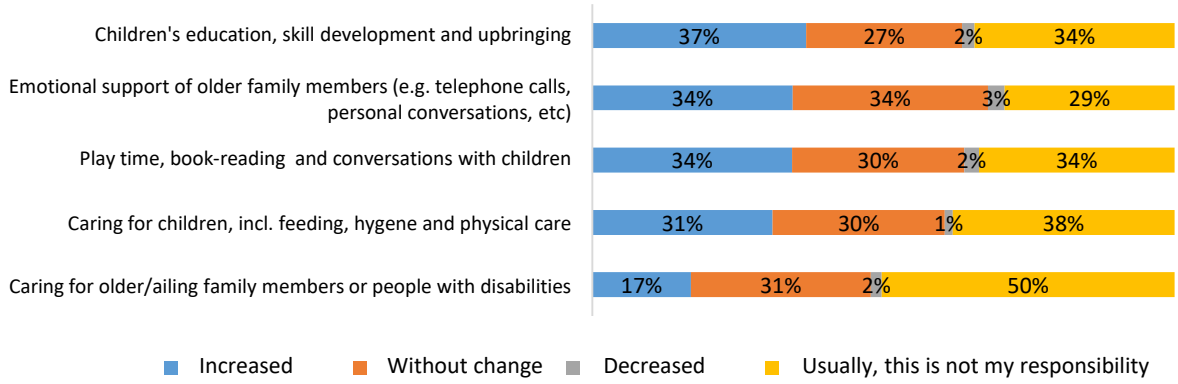
5. HOME WORKLOAD DISTRIBUTION UNDER COVID-19

According to the results of the study, under the quarantine conditions Kazakhstanis began to spend more time on raising children and caring for older family members than on everyday household chores.

One in three survey participants indicated an increase in leisure time with children (34 per cent) or for skills development and training (37 per cent). At the same time, the proportion of those who say they spend as much time with children as they did before quarantine varies at the level of 30 per cent.

34 per cent of survey participants said they spent more time on emotional support for adult family members; the same number of participants (34%) maintained the same mode of communication.

Figure 5.1 – Has the spread of COVID-19 changed the number of hours you spend raising children and caring for older family members? (% of the total number of respondents)

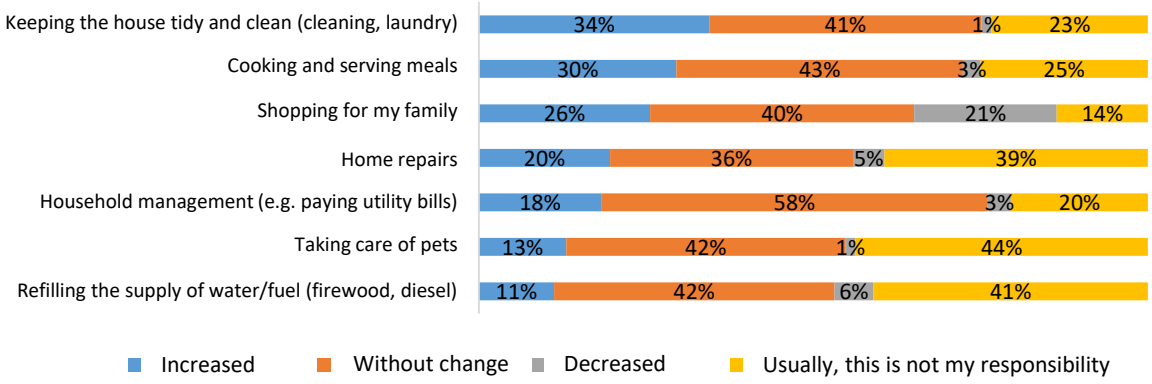


In terms of housework, 4 out of 10 respondents believe that the quarantine time resources they spend on daily household chores have not changed. However, the general trend in quarantine conditions to increase the time spent on household chores is obvious: the proportion of responses indicating a decrease in time spent on household chores varies between 3-5%. The exception to this is shopping trips. This was the only aspect of housework that showed a significant decrease in terms of the time spent on this activity: 21% of survey respondents said that shopping became less time consuming. However, 26% of the survey participants have indicated an increase in the time they spend on the purchase of products and goods.

Most frequently, the respondents answered that they began to spend more time on maintaining order in the house and cooking – 34% and 30%, respectively. One in five respondents (21%) used the quarantine period to repair their homes. 18% of survey respondents spent more time on household management issues. One out of ten survey participants increased the care of

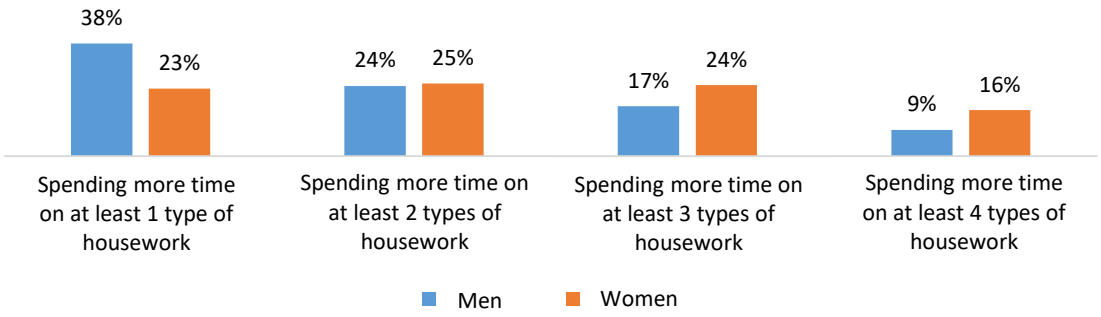
their pets and the resupply of water and fuel to the household. These activities are particularly relevant for rural areas.

Figure 5.2 – Has the spread of COVID-19 changed the number of hours you spend doing your housework? (% of the total number of respondents)



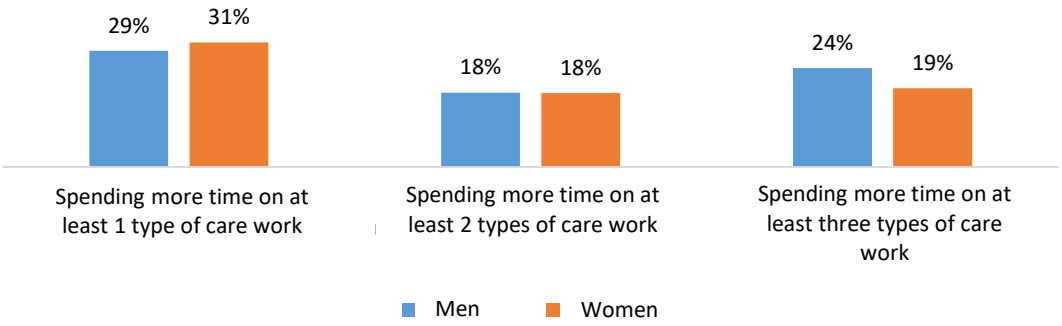
From a gender perspective, it can be seen that during isolation, women, more than men, have increased their workload while doing their domestic work. While the total share of men who have increased the time to complete three or more types of domestic work is 26 per cent, the proportion of women is 40 per cent.

Figure 5.3 – Load of men and women for domestic work (%)



In carrying out the functions of raising children and caring for senior family members, the distribution of responsibilities and the increased burden on both women and men are noticeable.

Figure 5.4 – Load of men and women to raise children and take care of older family members (%)

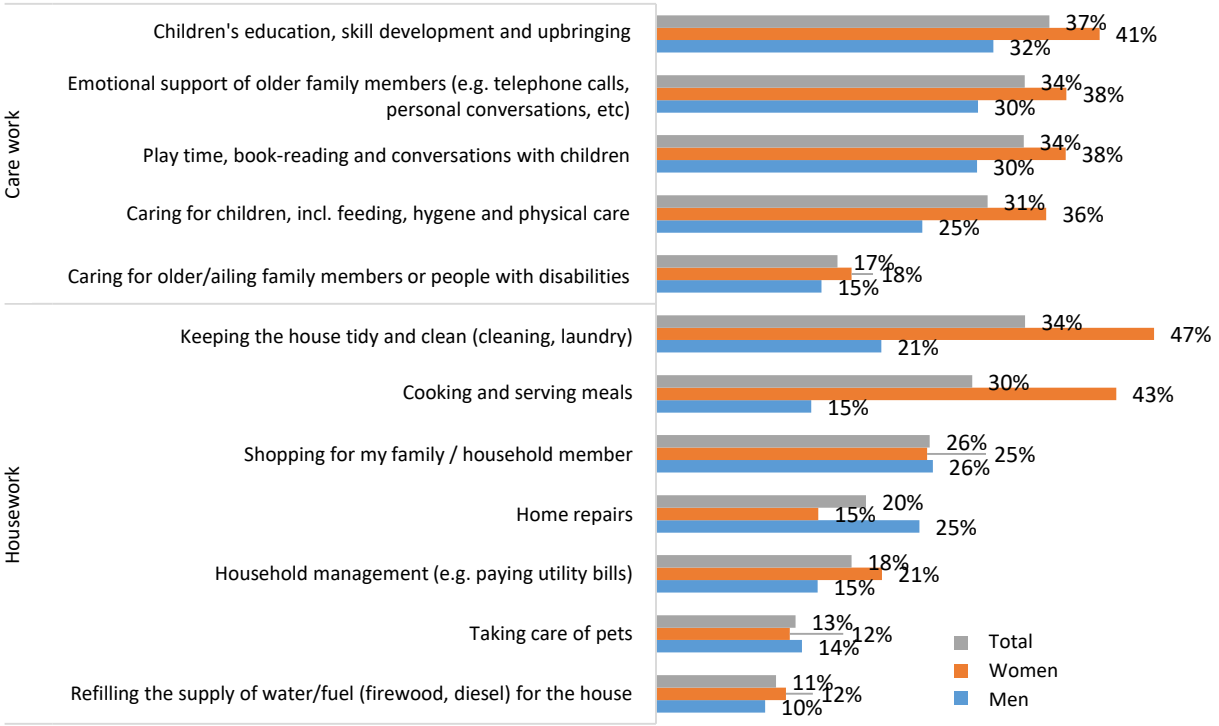


When doing household chores, almost one in two women respondents indicated an increase in the time they spent on housekeeping and cooking (47% and 43%). Men were more

likely to be responsible for household repairs (26%), shopping (25%) and maintaining order in the house (21%).

Men are more readily involved in the process of raising children and caring for older family members than they are engaged in their daily domestic tasks. Although women's time spent on household care has increased (from 18 per cent to 41 per cent), almost one in three male respondents responded that they have become more supportive of children's learning (32 per cent) as well as leisure time spent with them (30 per cent) and older family members (30 per cent). Women spent more time on physical care and hygiene of children (36%) and family members in need of care (18%). At the same time, married women began to pay more attention to their children, and unmarried women began to care for older family members.

Figure 5.3 – Has the spread of COVID-19 changed the number of hours you spend on the following household activities? (estimates taken for the option "increased")

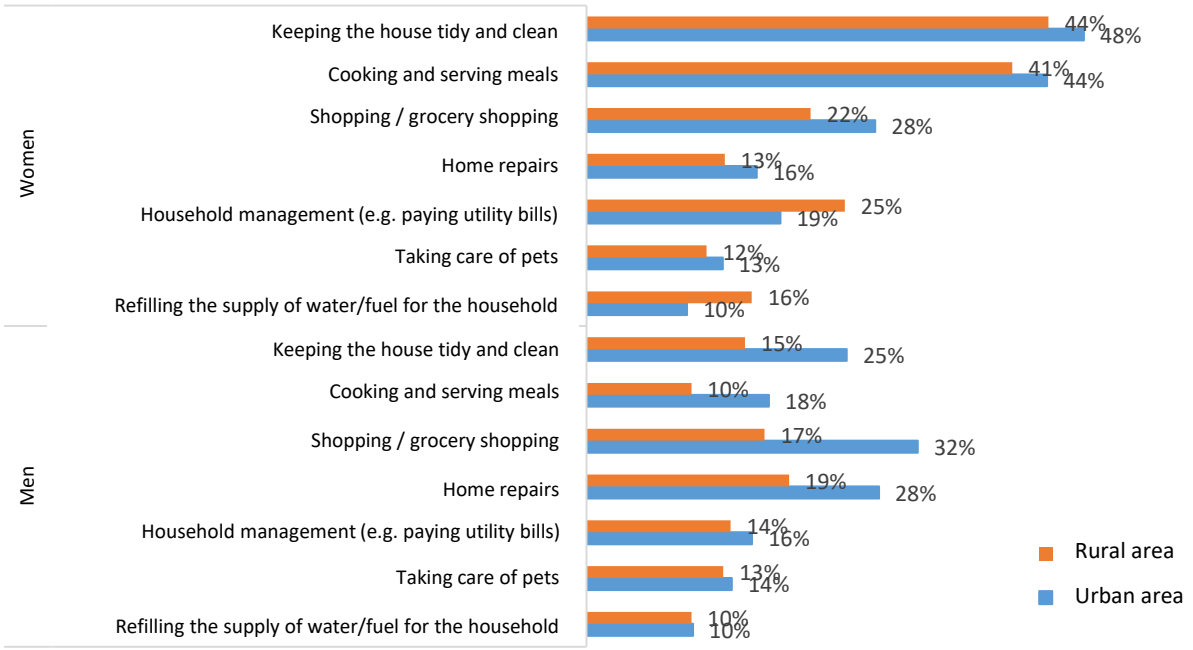


The largest disproportions with respect to the redistribution and performance of household chores are observed depending on the location of the survey participants.

It can be seen that the time spent on maintaining order in the house and preparing meals have increased more among urban women than among rural women. At the same time, women living in rural areas began to spend more time on household management and replenishment for household needs.

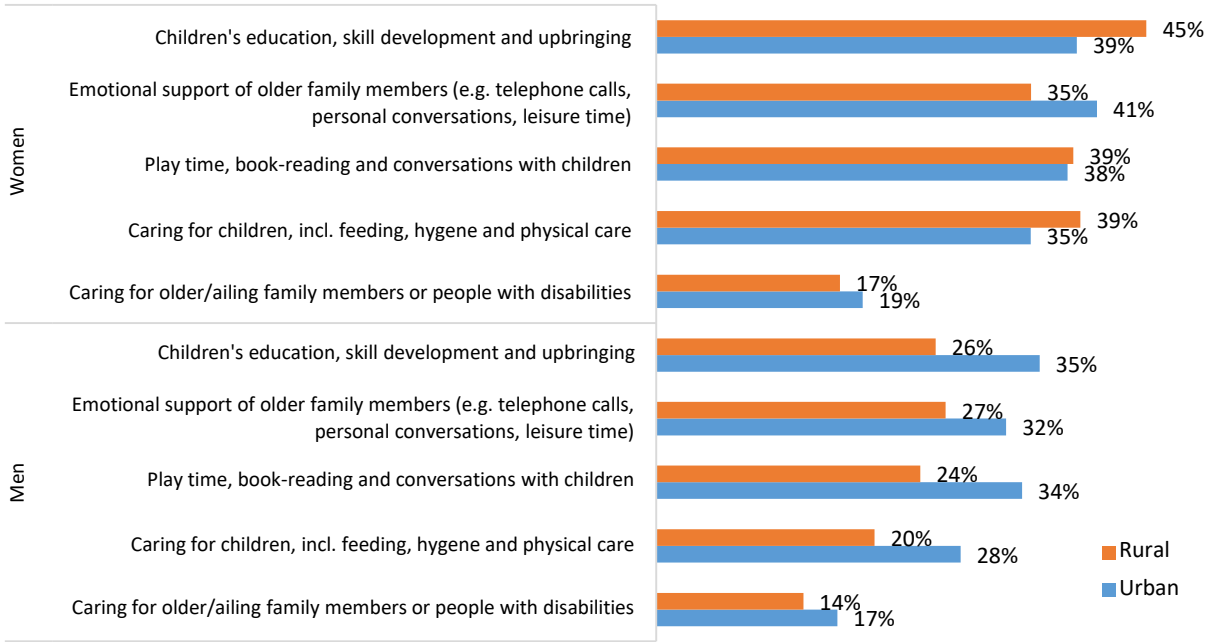
Male urban dwellers are less susceptible to gender stereotypes in the distribution of domestic functions than rural men are. According to the survey results, since the beginning of quarantine, male city residents, compared with male villagers, have spent almost twice as much time on such types of work as cooking (18% vs. 10%), maintaining order in the house (25% vs. 15%), and shopping (32% vs. 17%).

Figure 5.4 – The increase in the number of hours that men and women living in urban and rural areas spend under COVID-19 on household chores (% by area of residence)



In addition, male city residents spend more time compared to rural men, both on raising children and spending leisure time with them, and on supporting and caring for older family members. In contrast, rural women began to spend more time than urban women on training, skills development and upbringing of children (45% vs. 39%) and physical care of them (39% vs. 35%). Urban women spend more time compared to rural women on emotional support and physical care for older and sick family members.

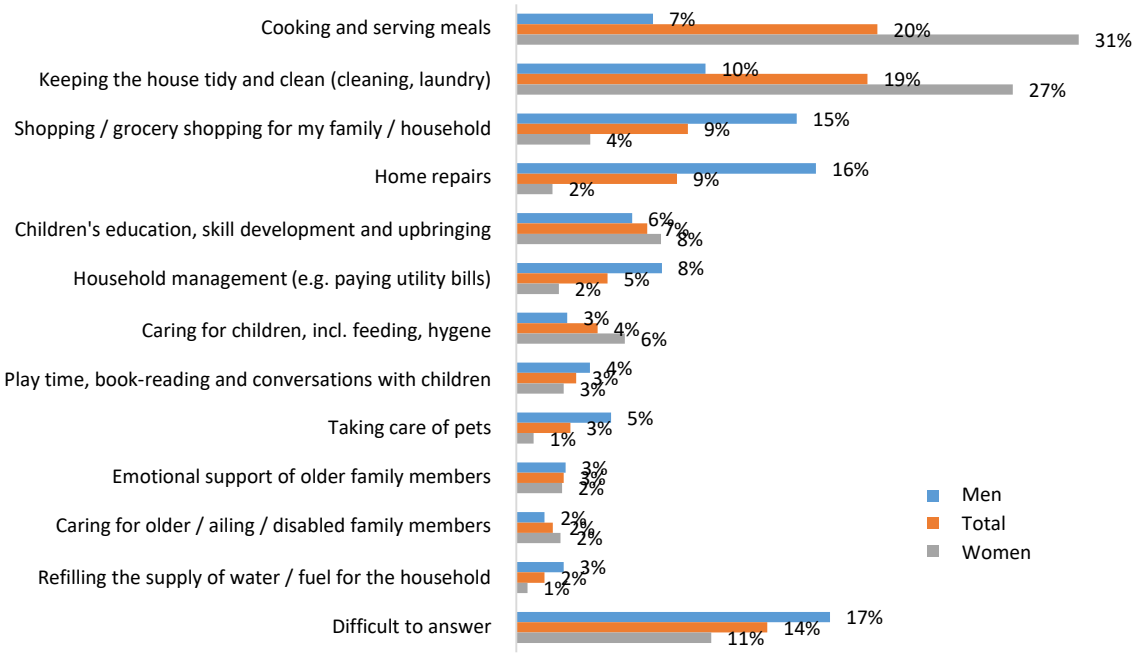
Figure 5.5 – Increase in the number of hours that men and women living in urban and rural areas spend under COVID-19 conditions raising children and caring for older family members (% by area of residence)



The survey showed that since the quarantine began, Kazakhstanis spent the most time on cooking (20%) and maintaining order in the house (19%). The third and fourth positions in the ranking are occupied by such tasks as shopping trips (9%) and repair work in the house (9%). The fifth place is occupied by training and educating children at home (7%).

The least time spent by survey participants is on water / fuel replenishment (1.5%) and medical and emotional support for adult family members (2% and 2.6% respectively). 13.8% of respondents found it difficult to answer this question.

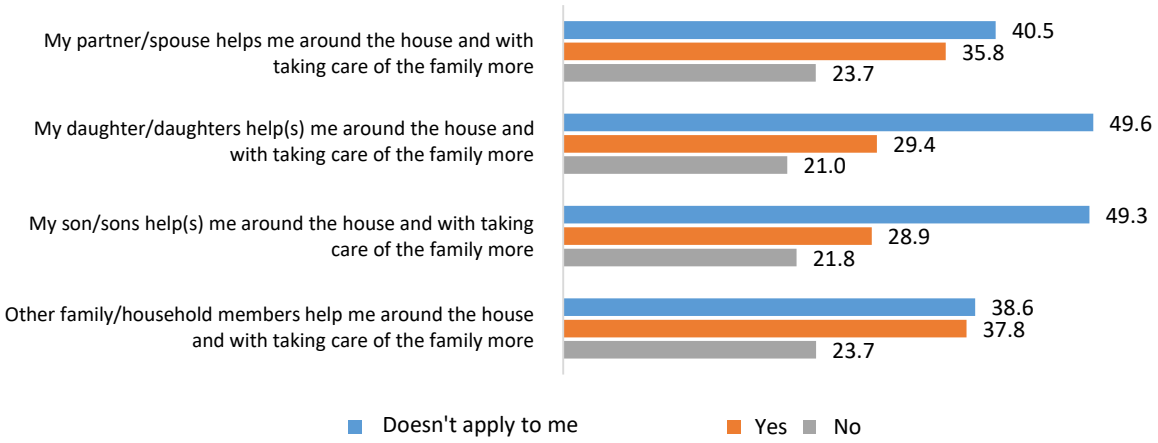
Figure 5.6 – Since COVID-19 began to spread, what kind of household activities do you personally spend the most time on? (% of the total number of respondents, by gender)



Analysis of the data from a gender perspective shows that women are mainly engaged in preparing food and maintaining order in the house, while men are busy shopping and doing repairs in the house. In addition, women are responsible for training, raising and caring for children, while men are more likely to take care of households and pets during the quarantine period. For the rest of the household activities, there is parity between the two genders.

Due to forced isolation, which is characterized by a high burden on individual family members, it is necessary to redistribute time resources and responsibilities for a particular type of household activity. The survey shows that in 36 per cent of cases, the respondents in their household chores are assisted by their spouses or partners with whom they live. Around 30% of respondents have indicated that their children have become more helpful, trying to ease their workload during quarantine, and one in five respondents does not receive support from their children. In 38% of cases, other family members have become more helpful at home and are trying to ensure balance in the distribution of household responsibilities.

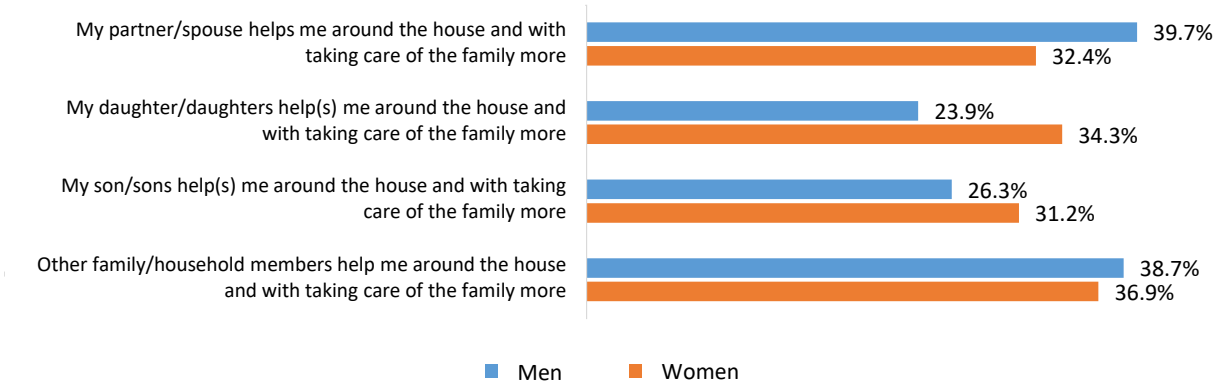
Figure 5.7 – Since COVID-19 began to spread, have roles and responsibilities changed in your household? (% of the total number of respondents)



Despite the fact that women's workload has increased in many domestic activities, women are more likely to help their husbands or partners (39.7%) than men to help their wives (32.4%). Women during the quarantine are more likely than men to receive support from their children. Both sons and daughters are more likely to help mothers with household chores and family care (31.2% and 34.3% respectively).

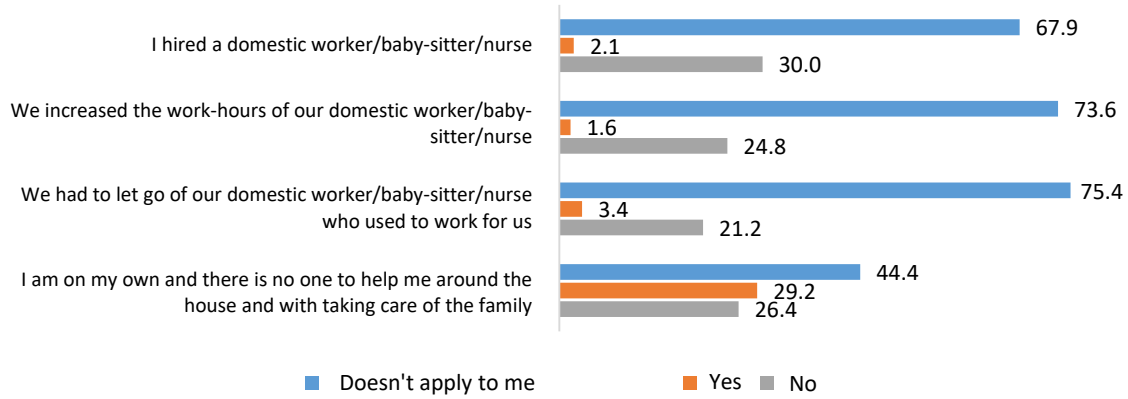
Data analysis shows that younger women living in rural areas feel more supported by their husbands or partners. Women in middle age groups receive more support from their children during isolation.

Figure 5.8 – Since COVID-19 began to spread, have roles and responsibilities changed in your household? (sorted by the option "yes")



According to the survey results, domestic workers / nannies for childcare or nurses are not in high demand. About 75 per cent of respondents do not use the services of representatives of these professions. Only 2.1% of the survey participants indicated that they hired a special employee or nurse for children or other family members. 3.4% of the respondents had to give up the services of a housekeeper or a nanny. Almost every third participant in the survey has noted that he / she is well versed in managing the household and none of his / her family members is able to provide help in this matter.

Figure 5.9 – Since COVID-19 began to spread, have roles and responsibilities changed in your household? (% of the total number of respondents)



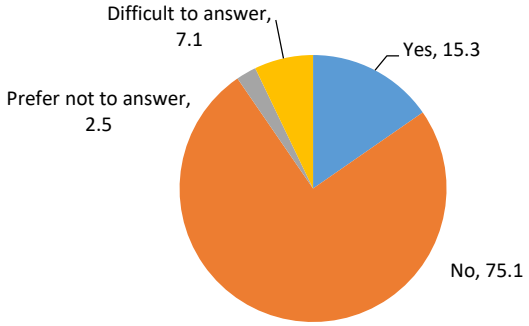
Thus, to summarize the above, it can be noted that the workload and the amount of unpaid domestic work under quarantine has increased significantly for both women and men. Most of the domestic work is related to maintaining order in the house, cooking and training, and raising children. At the same time, the influence of gender stereotypes in the distribution of domestic functions is observed, especially in rural areas. Women have begun to spend more time in the kitchen and men have started to spend more time renovating the house.

Despite the excessive workload, women are more likely to try to help their spouses. Attention is drawn to the fact that other family members, including children, are more willing to help their parents with household chores. Meanwhile, men, especially in urban areas, are readily involved in the upbringing and caring for children and older family members.

6. LIFE AND HEALTH SAFETY UNDER COVID-19

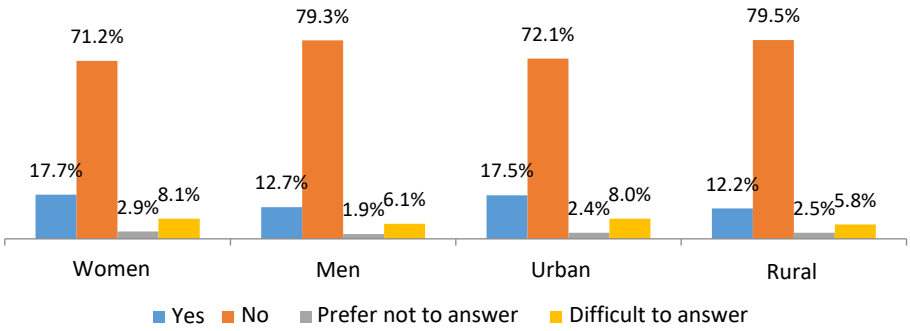
According to the survey, 15.3% of the participants noted that they had heard or experienced an increase in cases of domestic violence since the beginning of the spread of COVID-19. Three quarters of the respondents said they had not heard of it (75%). 2.5 per cent refused to answer this question.

Figure 6.1 – Have you heard or experienced an increase in cases of domestic violence since COVID-19 pandemics began? (% of the total number of respondents)



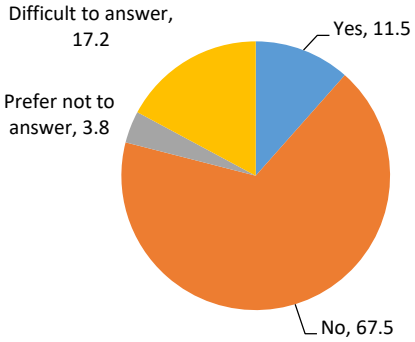
Women, townspeople, respondents aged 25-34 years (16.6%), divorcees (22.8%) and representatives of the lowest-income part of the population (22%) most frequently reported about the knowledge of cases or experiences of domestic violence during the quarantine period).

Figure 6.2 – Have you heard or experienced an increase in cases of domestic violence since COVID-19 began to spread? (in terms of gender and area of residence)



Of those who are aware of domestic violence after the beginning of the spread of COVID-19 (15.3%; n=338), one in nine respondents (11.5%) is aware of calls for support through the hotline, psychological support or the police. 67.5 per cent did not know about such cases, 17.2% found it difficult to respond.

Figure 6.3 – If the answer is yes, have you or the person who experienced violence contacted the hotline, psychological support or the police for support? (% of those who answered yes, n=338)



The most frequent cases of contacting "hotlines", psychological support or the police during the survey were reported by villagers; respondents aged 18-24 years (19.1%) and 55-64 years (13.6%); single / unmarried (17.6%) and divorced (16.7%); with an average income level (18.8%). At the same time, the survey did not reveal significant differences in the responses of women and men regarding requests for help in cases of domestic violence (11.7 per cent of women and 11.4 per cent of men responded "yes").

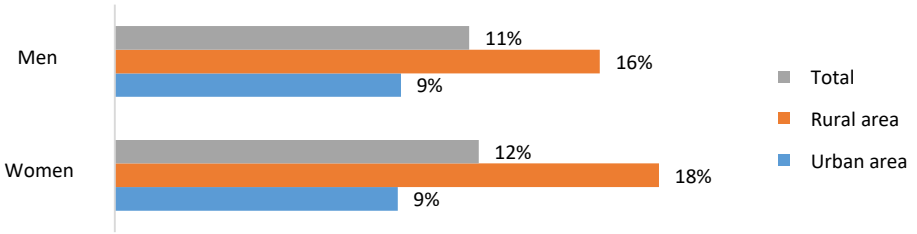
The results presented in three-dimensional table 6.1 show that rural women and men more often than urban residents reported cases of people who suffered from domestic violence. Attention is drawn, however, to the significant proportion of urban women and men who found it difficult to answer this question (19.6% and 21.8% respectively) and the significant difference in the proportion of rural women and men who found it difficult to answer (4.8% and 17.8% respectively).

Table 6.1 – If the answer is yes, have you or the person who experienced violence contacted the hotline, psychological support or the police for support? (% of those who answered "yes"; broken down by gender and residence)

Gender	Question	Options for response	City	Village	All respondents
Women	If the answer is yes, have you or the person who experienced violence,	Yes	9.1%	**17.5%**	11.7%
		No	67.8%	74.6%	69.9%

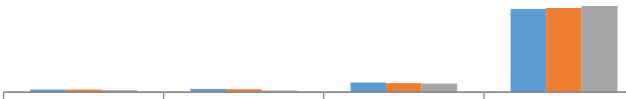
	sought support from the hotline, psychological support service or the police?	Refuse to answer	3.5%	3.2%	3.4%
		Difficult to answer	19.6%	4.8%	15.0%
Men	If the answer is yes, have you or the person who experienced violence, sought support from the hotline, psychological support service or the police?	Yes	9.2%	**15.6%**	11.4%
		No	64.4%	62.2%	63.6%
		Refuse to answer	4.6%	4.4%	4.5%
		Difficult to answer	21.8%	17.8%	20.5%

Figure 6.4 – Percentage of respondents who know of the cases or have themselves sought support through the hotline, psychological support or the police because of domestic violence by gender (% of those who answered "yes")



More than 80% of the interviewed women have not resorted to maternal health services, family planning or psychological support for victims of domestic violence since the beginning of the spread of COVID-19. Of those who have used these services, 5.9 per cent had great or some difficulty in accessing maternal health services, 5.4 per cent had difficulty accessing family planning services, and 3.8 per cent had difficulty accessing psychological support.

Figure 6.5 – Since the start of Covid-19, have you had difficulty accessing reproductive health services? (only women responded; n = 1161)



	Considerable difficulties	Some difficulties	No difficulties	I do not require the services
Maternity care services	2.5	3.4	9.7	84.3
Family planning	2.5	2.9	9.2	85.4
Psychologic support for domestic violence victims	2.1	1.7	8.9	87.3

The survey data presented in Table 6.2 shows that respondents aged 25-34 years (11.3%) and 35-44 years (6.5%) are more likely to complain about difficulties in obtaining maternity care services, while urban women are more likely than rural women to report no problems (11.1% and 7.6%). Urban women (6.1%) and respondents aged 25-34 years (10.2%) are more likely to report difficulties in accessing family planning services. Rural women (5.2%) and survey participants aged 25-34 years (6.7%) more often complain of difficulties in obtaining psychological support services for victims of domestic violence).

Table 6.2 – Since the start of Covid-19, have you had difficulty accessing reproductive health services? (by place of residence and age of respondents)

		City	Village	18-24	25-34	35-44	45-54	55-64	65+
Maternal health services	No need for these services	82.5%	87.1%	74.8%	75.4%	81.9%	89.1%	92.7%	98.5%
	Great difficulties	2.7%	2.2%	1.4%	**4.6%**	**4.2%**	0.5%	1.6%	0.8%
	Some difficulties	3.7%	3.1%	4.9%	**6.7%**	**2.3%**	3.6%	1.0%	-
	No problems	11.1%	7.6%	18.9%	13.3%	11.6%	6.8%	4.7%	0.8%
Family planning services	No need for these services	84.0%	87.4%	73.4%	77.5%	85.2%	89.6%	93.2%	97.7%
	Great difficulties	3.0%	1.7%	2.8%	3.5%	2.8%	1.6%	1.6%	2.3%
	Some difficulties	3.1%	2.6%	3.5%	6.7%	2.8%	2.1%	-	-
	No problems	9.8%	8.3%	20.3%	12.3%	9.3%	6.8%	5.2%	-
Psychological support to victims of domestic violence	No need for these services	87.7%	86.7%	76.2%	79.6%	88.9%	91.1%	93.8%	98.5%
	Great difficulties	1.9%	2.4%	2.1%	3.2%	1.9%	2.1%	1.6%	0.8%
	Some difficulties	1.0%	2.8%	2.1%	3.5%	1.9%	1.0%	-	0.8%
	No problems	9.4%	8.1%	19.6%	13.7%	7.4%	5.7%	4.7%	-

7. RECOMMENDATIONS

The study identified a number of issues that would be useful for decision-makers to consider as the survey results are planned to be used to: a) adjust response plans to address the gender-specific nature of the pandemic; b) identify key priorities to support the most vulnerable groups in COVID-19 settings; c) understand different aspects of the social well-being of people in COVID-19 settings.

1. About one third of the respondents are not satisfied with the information provided since the dissemination of COVID-19 (promptness of communication, its clarity, consistency), which makes it difficult for them to understand and timely respond to the situation. However, among men, the cumulative percentage of dissatisfied with the quality of information on COVID-19 is 32 per cent; among women, the same proportion is 27 per cent.

The study found that members of multi-generational families living together are most concerned about the quality of information, for whom diversity (taking into account the interests of children, parents, and the older generation), timeliness and completeness of information are essential, and now it is not enough to make the right decisions for all target groups. Physical care and medical manipulations with older and sick family members are the responsibility of capable household members, which also requires consultations with qualified professionals to avoid negative consequences.

At the same time, the majority of survey participants use information from unstructured sources – the Internet and social networks – while neglecting the traditional mass media (television and printed publications) and official sources of information (reports of representatives of government bodies).

Recommendation. Lessons should be learned for government information policy from the quarantine process. First of all, the objectives are to provide the population with consistent, comprehensive and at the same time applied information about COVID-19 and ongoing quarantine measures. Thus, in addition to direct statistics on the number of sick / recovered / dead, on television and in the print media, it is necessary to increase the volume of information, explanations, comments and recommendations, taking into account the requests of different target groups of the population. At the same time, it is necessary to increase the number of expert programs and materials in which coverage of COVID-19 is provided not only on behalf of government agencies, but also with the constant inclusion of a variety of experts, qualified representatives of medical, educational and other communities.

Protocols for the organization and provision of social and psychological support services in the field should also be developed. This type of service should become an integral part of social security in crisis and emergency situations.

2. According to the results of the survey, significant groups of the population, primarily those employed in the labor sphere, experience problems due to the loss of work and income. The results of the survey show that in the largest group of employed people, which are hired workers, one in five has lost their job, and one in three has lost their income while keeping a job. In the self-employed group, only 15% managed to maintain a stable position. Almost one in three lost their jobs and one in two lost their income.

The state is taking measures to reduce the quarantine burden on such groups of the population; assistance is provided in various directions, primarily with the help of financial resources. At the same time, as the results of the research show, there are groups of population that require increased attention. After the beginning of COVID-19 spread, six out of ten entrepreneurs / freelancers (60%) had to completely stop their business. Rural entrepreneurs and women's businesses were more heavily affected by this situation. The share of women forced to work from home is higher than the share of women who continue to work outside the home (56% vs. 40%; for men – 60% vs. 35%).

Recommendation. In the post-quarantine period, after the greatest pressure on the work of social services eases, it is necessary to focus on the targeted nature of assistance to the most affected groups. In the course of providing social assistance (42,500 tenge), a significant amount of data was collected on various categories of the population, so it would be advisable to maximize its use in the post-quarantine period for the follow-up work of the state to provide targeted support to socially vulnerable groups.

Given the difficult situation in the group of entrepreneurs and the devastation of a great part of them during the quarantine, it is necessary to take special measures to support them through microcredit programmes by expanding the categories of persons eligible for receiving microcredits and microloans, including women entrepreneurs and rural entrepreneurs. It may also be during this period that it makes sense, based on the analysis, to implement measures to legalize the business activities of women employed in the informal sector.

As part of the deployment of the Economics of Simple Things Programme, it is necessary to stimulate the development of local full-cycle businesses based on local material, technical and

resource base, which will help to maintain the stability of enterprises and the preservation of employment in conditions of forced territorial isolation.

3. The survey showed that the resource of assistance provided by non-state institutions – business, charity and non-governmental organizations – was not widely noticed by the population. The resource of the volunteer movement was also scarce. Thus, only 3% noted an increase in support from NGOs and other organizations of the "third" sector. The share of respondents who received assistance in kind (foodstuffs and means of prevention (gloves, masks, disinfectants, etc.) from civil sector representatives – 5%; from business – 3%. At the same time, a significant number of respondents from socially vulnerable groups needed support, but were not covered by it, primarily due to the high workload of the relevant government agencies and the lack of coordinated actions by representatives of the state and non-governmental sectors.

> **Recommendation.** Opportunities for tapping into the potential of the non-governmental sector during emergencies require further study. It is also advisable to use the resource of major centralized "players" from among civil society institutions, such as the Civil Alliance of Kazakhstan, the NPP "Atameken" (with the Council of Business Women) to raise awareness of the affected population groups about the availability of additional distant training options, to improve women's entrepreneurial skills, and to provide advisory services.
>
> It also seems that the current situation should be used to increase the political weight and authority as well as the influence of socially oriented organizations and institutions protecting the interests of women and children.

4. If the restrictive measures related to the spread of COVID-19 continue, in terms of financial behavior respondents will start saving, i.e. trying to optimize costs. This will affect the basic costs of food and hygiene products, which will be difficult to cover for 62% of respondents, 60% will have difficulty paying utility bills, 56% will have to stop applying for paid medical services / assistance. Women, in case of continuation of restrictive measures, will be more likely to use the strategy of optimizing / reducing their intra-family expenses, which will affect the quality of life, including children, while men will be more likely to use external (outside the household) financial instruments, such as loans and social assistance.

> **Recommendation.** Since the period of state financial and other assistance to the population is limited to 2 months of quarantine, and its social and economic consequences will clearly go beyond this period, it is necessary to monitor the development of the post-quarantine situation and the mood of the population, not only in the sanitary and epidemiological vein, but also in terms of tracking the timeliness of payment of wages and social benefits, preventing a revision towards increasing tariffs of natural monopolists from among those providing utility services, carrier services, etc.