

REBUILD

THE SOCIAL AND ECONOMIC IMPACT OF COVID-19
POLICY RESPONSES ON WOMEN WORKING IN THE
INFORMAL URBAN ECONOMY IN **KENYA**



ICRW INTERNATIONAL CENTER
FOR RESEARCH ON WOMEN

In Kenya, the informal sector provides **87%** of employment opportunities and livelihoods for approximately **15 million** people. Compared to men, women in the informal sector face a number of challenges including low earning capacity, limited skills, persistent harmful social and gender norms, the burden of childcare, and heightened exposure to gender-based violence (GBV) and conflict.

KEY FINDINGS

1.0 Socio-demographics of survey respondents



Age 18-70yrs (Average 37 years)

44% had obtained secondary education.
About half were married, & most had children.

2.0 Informal Women Workers (IWWs) pre-existing characteristics



Health Insurance

Most of the IWWs (**63%**) did not have insurance before the pandemic, and this increased to **71%** after the pandemic



Exclusion: Access to credit

Access to traditional financial products was rare; **about half** had mobile finance accounts, **a little less than one-third** used savings groups, and **21%** had no access to savings channels. Women used similar products for access to credit.

3.0 Policies effects on IWWs' care and domestic work burdens



High childcare burden from the COVID-19 lockdown forced IWWs to sacrifice paid working time to increase time spent on care duties

4.0 Effect on livelihoods of IWWs



IWWs reported shifts in type of employment, reduced hours and income, and significantly impacted financial well-being.

5.0 Inadequate access to official COVID-19 relief measures



With limited access to government-provided relief measures, many IWWs depleted their savings and working capital to survive during the lockdown, employing coping strategies such as reducing expenditure, buying on credit, depleting savings, and selling property. **34%** of IWWs believed they would bouncing back after the pandemic.

6.0 High prevalence of GBV



About 24% of IWWs reported experiencing GBV during the COVID-19 pandemic. Movement restrictions hampered access to GBV service providers.

24%

POLICY RECOMMENDATIONS

- **Invest in and incentivize accessible childcare facilities:**
The childcare responsibilities the IWWs face reflect the need for childcare facilities at or near IWWs' workplaces.
- **Support and increase access to formal credit:**
The government should support all possible platforms for the IWWs to access business credit, including mobile money, Chamas, savings and credit cooperative organizations, and savings and lending association platforms.
- **Create and implement comprehensive social protection:**
The government, in collaboration with development partners, should implement a comprehensive social protection program, including universal health insurance coverage to support IWWs and other low-income groups.
- **Increase access to SRH and GBV services:**
The government should work with Civil Society Organizations (CSOs) to develop innovative ways of increasing access to Sexual Reproductive Health (SRH) and GBV services at the community level. Training community health workers and financially supporting them to provide basic SRH in markets and other workplaces for informal business can increase access and reduce time burden of traveling to appointments. A similar approach should be adopted for GBV service providers at the community level.