

# TWO YEARS ON

## THE LINGERING GENDERED EFFECTS OF THE COVID-19 PANDEMIC IN SAMOA



## BACKGROUND

Evidence shows that the consequences of the COVID-19 crisis span well beyond its direct health effects, impacting access to health care, employment and income, among other outcomes, and women are often at a disadvantage.<sup>1</sup> To measure these concerns and design effective responses to the crisis, UN Women partnered with the Asian Development Bank (ADB) and the Government of Samoa to implement a second round of a Rapid Gender Assessment Survey (RGA) utilizing Computer Assisted Telephone Interviewing (CATI).<sup>2</sup>

This lasted eight weeks and began in September 2021. The sample was large and balanced, including 2,142 adults (age 18 and over), with 50 per cent women and 50 per cent men<sup>3</sup> (annex I). At the time of data collection, the COVID-19 caseload in Samoa was low. At the beginning (30 September 2021), there was one reported case, while at the end of fieldwork (8 December 2021), two cases were reported and contained in quarantine. At that time, no lockdown had taken place in Samoa.

<sup>1</sup> For further references on the gendered effects of COVID-19, see <https://data.unwomen.org/resources/covid-19-emerging-gender-data-and-why-it-matters>.

<sup>2</sup> For an overview of results from the first round of the Rapid Gender Assessment Survey in Samoa, see [Unlocking the lockdown: The gendered effects of COVID-19 on achieving the SDGs in Asia and the Pacific | UN Women](#).

<sup>3</sup> Methodological details are provided in the regional report, available at <https://data.unwomen.org>.

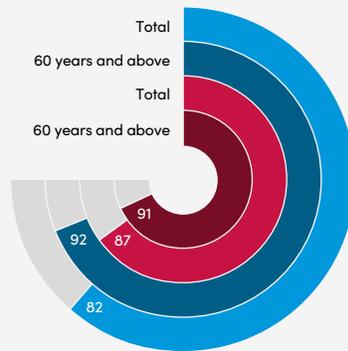
## KEY FINDINGS

### COVID-19 VACCINATION RATES IN SAMOA ARE HIGH BUT FEWER WOMEN THAN MEN RECEIVED TWO DOSES

The Government-led vaccination programme in Samoa was first rolled out in April 2021. An estimated 82 per cent of women and 87 per cent of men self-reported having received two doses of COVID-19 inocula-

tion as of November 2021 (figure 1). Gender gaps are clear in rural areas, with women at a disadvantage (figure 2).

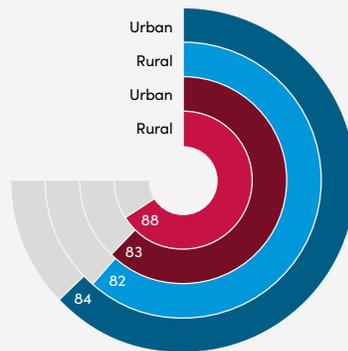
**Figure 1:** Proportion of people who completed two doses of COVID-19 inoculation as of November 2021, by sex and age group (percentage) (n=2,142)



■ Women ■ Men

Note: Respondents who indicated they did not know if they had been vaccinated or who refused to answer are included among those who did not complete two-dose inoculation. Gender difference is statistically significant ( $p < 0.05$ ) for Samoa ( $p = 0.01$ ).

**Figure 2:** Proportion of people who completed two doses of COVID-19 inoculation as of November 2021, by sex and location (percentage) (n=2,141)



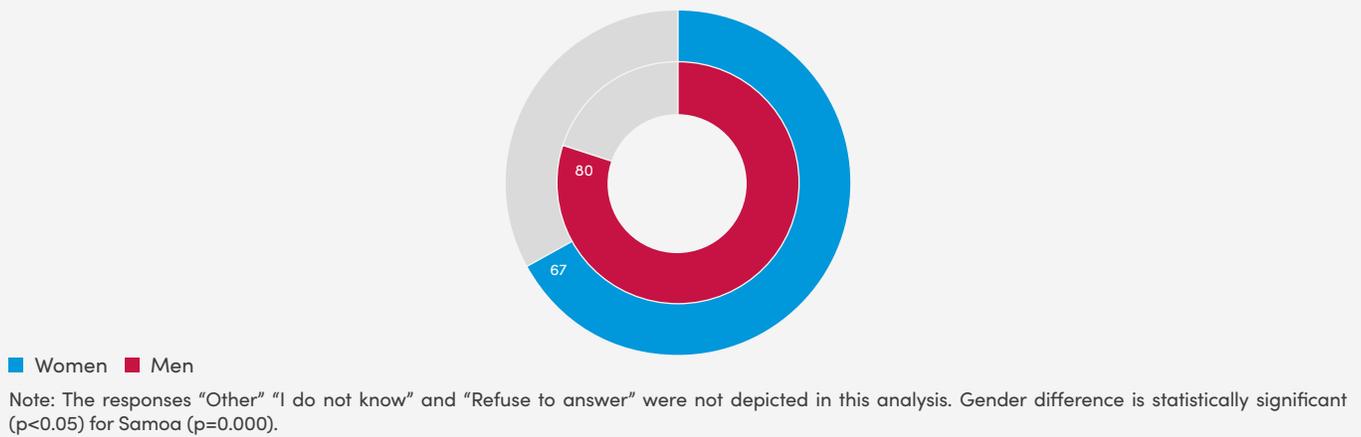
■ Women ■ Men

Note: Respondents who indicated they did not know if they had been vaccinated or who refused to answer are included among those who did not complete two-dose inoculation. Gender differences are statistically significant ( $p < 0.05$ ) for the rural population of Samoa ( $p = 0.003$ ).

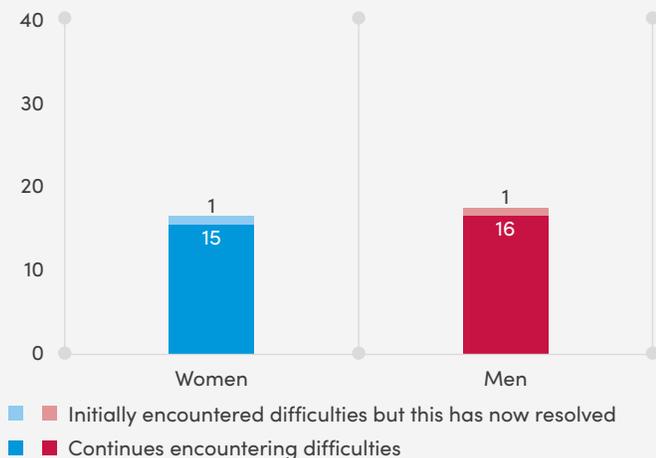
The majority of respondents who had not received two doses of COVID-19 inoculation cited “waiting to be called for receiving the second jab” as the main reason. This was less the case among women than men (67 per cent women and 80 per cent men) (figure 3). Misconceptions about the effects of vaccines on breastfeeding and

pregnant mothers were cited as main reasons by 23 per cent of women who had not completed two doses. Fears of contagion and overwhelmed health care facilities affected access to health, globally. In Samoa, less than one third of respondents noted difficulties accessing medical supplies and hygiene products (figures 4 and 5).

**Figure 3:** Proportion of people who cited “waiting to be called” as the main reason for not having received two doses of COVID-19 inoculation as of November 2021, by sex (percentage) (n=271)

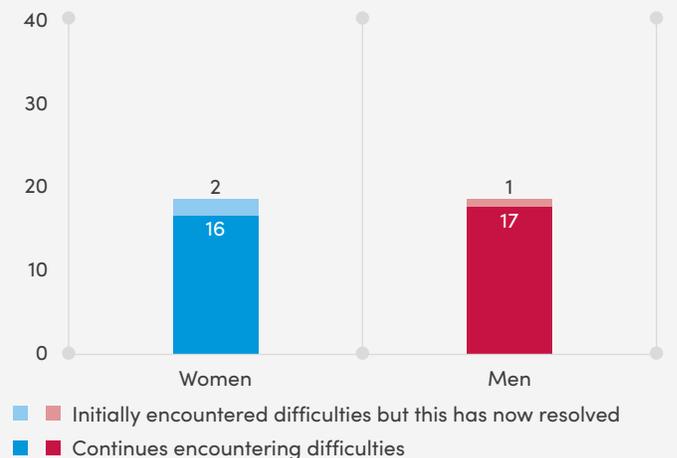


**Figure 4:** Proportion of people who encountered difficulties accessing medical supplies, by sex (percentage) (n=2,142)



Note: For women and men in Samoa, estimates for “initially yes but has now resolved” should be interpreted with caution as the number of respondents is less than 25. Respondents who indicated “I do not know” or who refused to answer were considered as not having encountered difficulties accessing medical supplies.

**Figure 5:** Proportion of people who encountered difficulties accessing hygiene products, by sex (percentage) (n=2,142)



Note: For women and men in Samoa, estimates for “initially yes but has now resolved” should be interpreted with caution as the number of respondents is less than 25. Respondents who indicated “I do not know” or who refused to answer were considered as not having encountered difficulties accessing hygiene products.

## MORE WOMEN ARE LEAVING THE LABOUR MARKET TO TAKE ON ADDITIONAL HOUSEHOLD CHORES

Prior to the COVID-19 pandemic, fewer women than men engaged in gainful employment.<sup>4</sup> The pandemic exacerbated gender inequalities and pushed some women out of the labour market to take on additional unpaid work at home (figure 6).<sup>5</sup> The pandemic pushed more workers

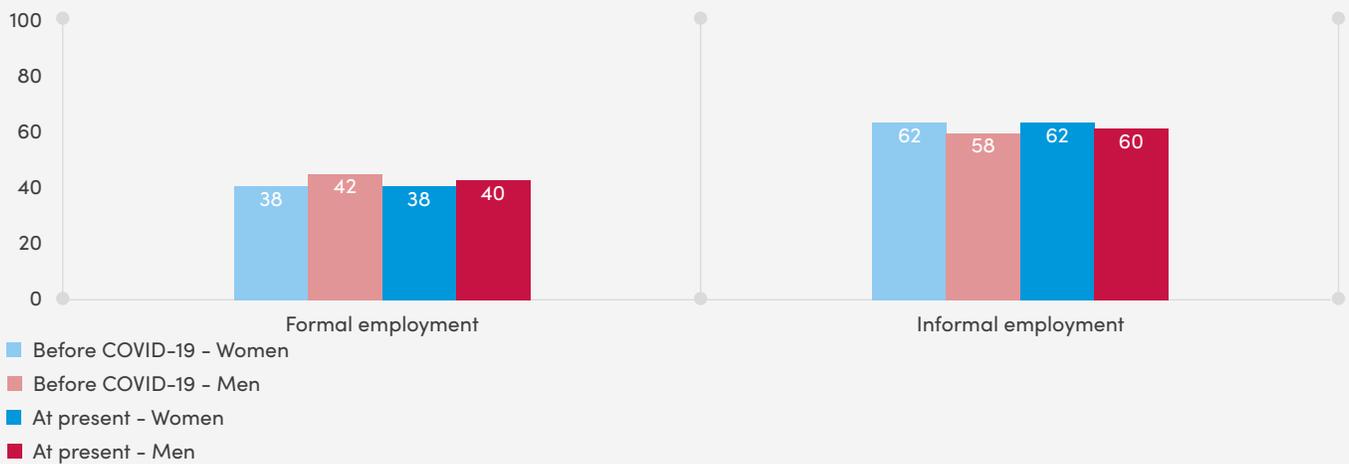
into informal jobs in Samoa, with slightly more men than women noting the shift from formal to informal jobs. Nevertheless, women are still more likely than men to engage in informal employment overall (figure 7).

**Figure 6:** Proportion of people in employment and performing unpaid domestic and care work, before COVID-19 and at present, by sex (percentage) (n=449 current employment; n=449 previous employment)



Note: Estimate for men who engaged in unpaid domestic and care work at present and before COVID-19 should be interpreted with caution as the number of responses is less than 25 each. Across women in unpaid care and domestic work at present and before COVID-19, difference is statistically significant ( $p < 0.05$ ) for Samoa ( $p = 0.001$ ).

**Figure 7:** Proportion of people engaged in informal and formal employment, before COVID-19 and at present, by sex (percentage) (n =284 current employment; n=316 previous employment)



Note: Gender differences are statistically significant ( $p < 0.05$ ) for women and men in informal employment at present ( $p = 0.02$ ).

4 According to ILOSTAT (accessed 4 May 2022), in 2017, labor force participation of people aged 15 years and above in Samoa was 41 per cent for women and 67 per cent for men.

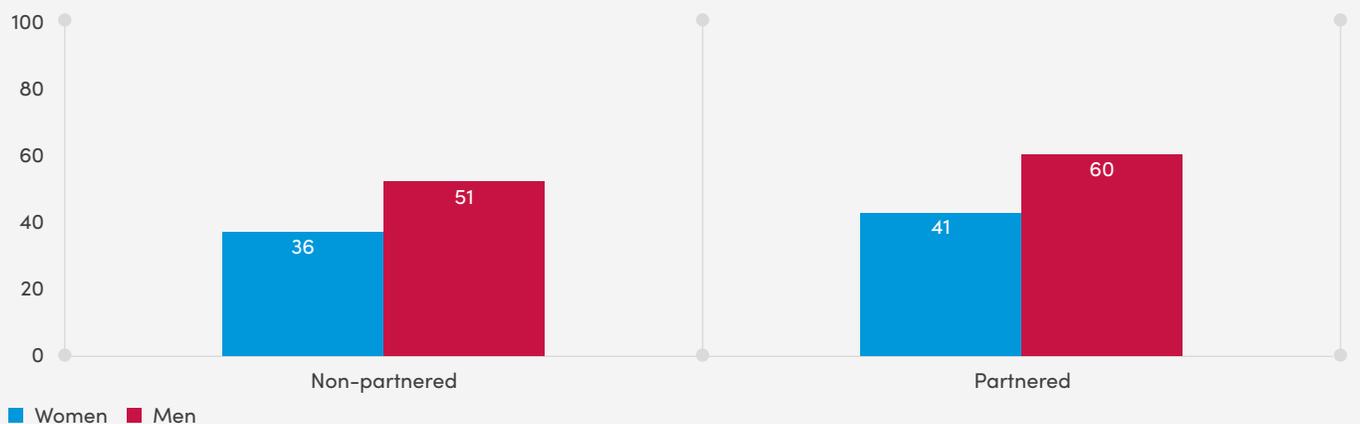
5 For an overview of job losses during the first wave of the pandemic, see ILO (2020) *Findings of the Rapid Assessment in Fiji and Samoa*. ILO Brief, July.

## THE PANDEMIC IS WORSENING GENDER POVERTY GAPS, AS WOMEN ARE LESS LIKELY TO HAVE AN INCOME AND MORE LIKELY TO LOSE IT WHEN THEY DO

In Samoa, 40 per cent of women and 57 per cent of men noted having a source of personal income at the time of the survey. Gender gaps in this regard are larger among partnered people, with women at a

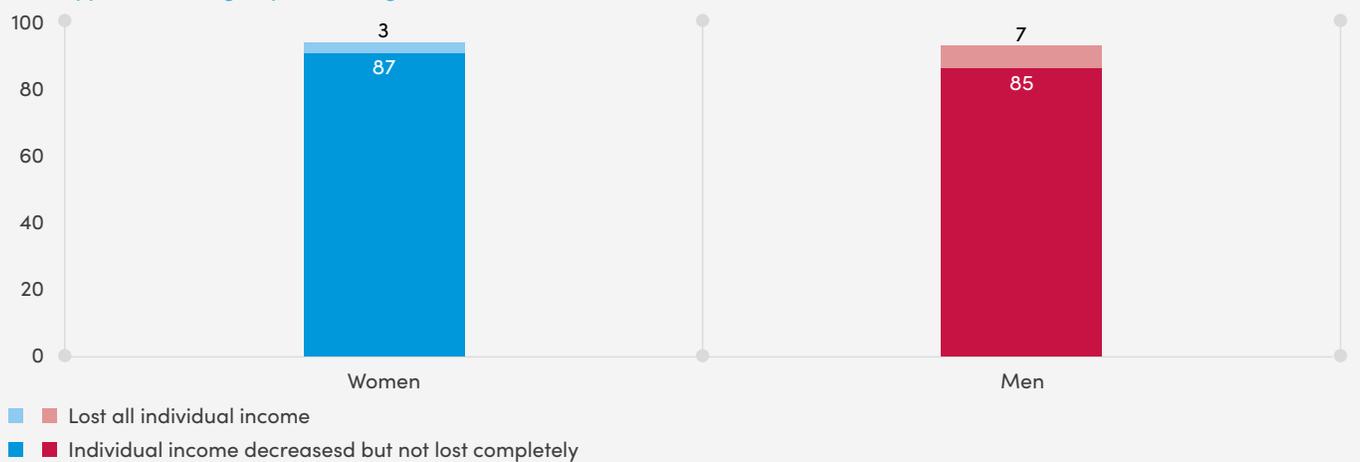
disadvantage (figure 8).<sup>6</sup> As a result of the economic slowdown triggered by the pandemic, 87 per cent of women and 85 per cent of men saw drops in their income (figure 9).

**Figure 8:** Proportion of people who have a source of personal income, by sex and partnership status (percentage) (n=2,137)



Note: Partnership status was classified as partnered if respondents were married and non-partnered if respondents were separated, widowed, divorced or single (never married). The response "I do not know" and "Refuse to answer" were not depicted in the figure. Gender differences are statistically significant for Samoa ( $p < 0.05$ ).

**Figure 9:** Proportion of people who saw changes in personal income since the onset of COVID-19, by sex and type of change (percentage) (n=577)



Note: For women in Samoa, estimates for "Lost all individual income" should be interpreted with caution as the number of respondents is less than 25. The response "I do not know" and "Refuse to answer" were not depicted in this analysis. Respondents who indicated "Individual income increase" amounted to only 9 per cent of the sample and thus were not depicted in the figure.

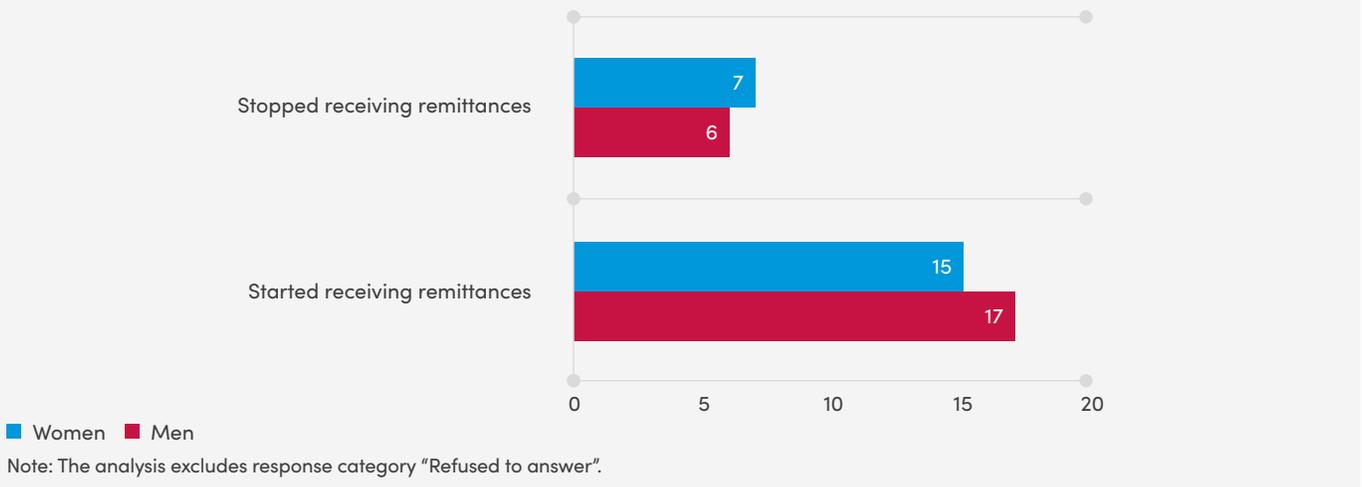
<sup>6</sup> Non-partnered women and men tend to be younger and are less likely to earn an income.

## REMITTANCES ARE A LIFELINE FOR MANY, BUT THE PANDEMIC HAS SHIFTED THESE FLOWS TOWARDS MEN

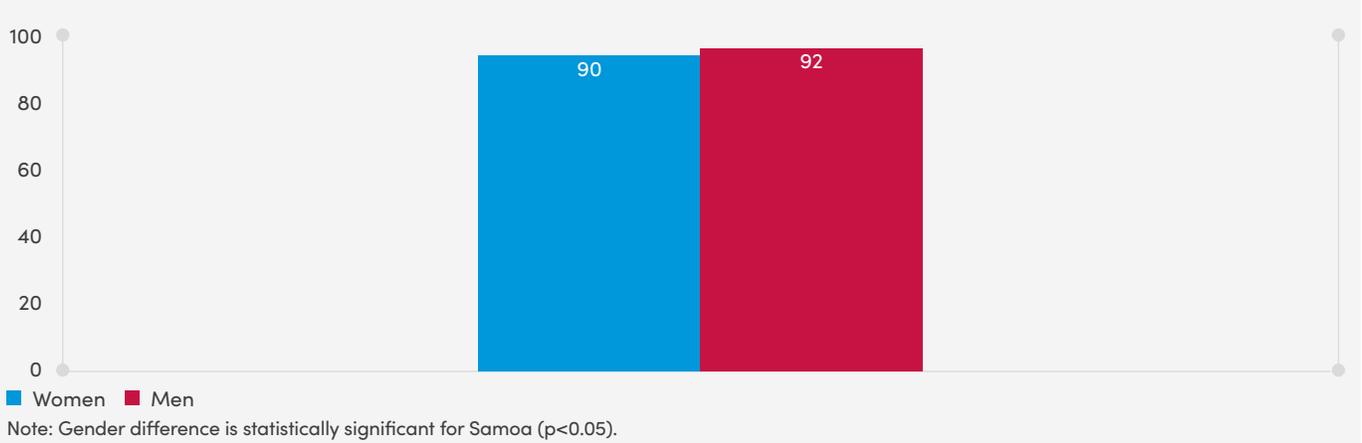
In Samoa, more than half of the population receive remittances (70 per cent of women and 68 per cent of men). Samoan women are more likely to note they have stopped receiving remittances since the onset of the pandemic, while men are more likely to have started receiving them

(figure 10). All in all, more people are now receiving remittances than before the pandemic, and men are benefitting more. Among those who received remittances prior to the pandemic and continue to do so, most have seen drops in the amounts received (figure 11).

**Figure 10:** Proportion of people who stopped/started receiving remittances since the onset of COVID-19, by sex (percentage) (n=2,141)



**Figure 11:** Proportion of people who received remittances prior to the COVID-19 pandemic and noted a decrease in the amount received, by sex (percentage) (n=620)



## CHANGES IN HOUSEHOLD INCOME AND OTHER FACTORS ARE RENDERING WOMEN MORE VULNERABLE TO FOOD HARDSHIP

About 50 per cent of people saw changes in their household income since the onset of the pandemic (94 per cent of women and 96 per cent of men who noted a change in household income saw it decrease). Of these women, 56 per cent had no personal income, compared to 37 per cent of men. Drops in income,

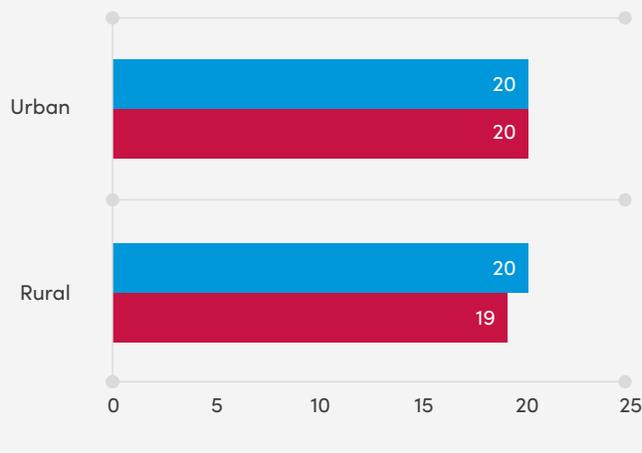
in many cases, were accompanied by food hardship. In Samoa, roughly 20 per cent of adults are experiencing moderate or severe food hardship. The proportion of women experiencing these challenges is slightly higher than that of men in rural areas, but the opposite is true in urban settings (figure 12).

Infographic 1: Severe food hardship in Samoa



**FACED SEVERE FOOD HARDSHIP SINCE THE ONSET OF THE PANDEMIC.**

Figure 12: Proportion of people experiencing moderate or severe food hardship, by sex and location (percentage) (n=2,127)



■ Women ■ Men

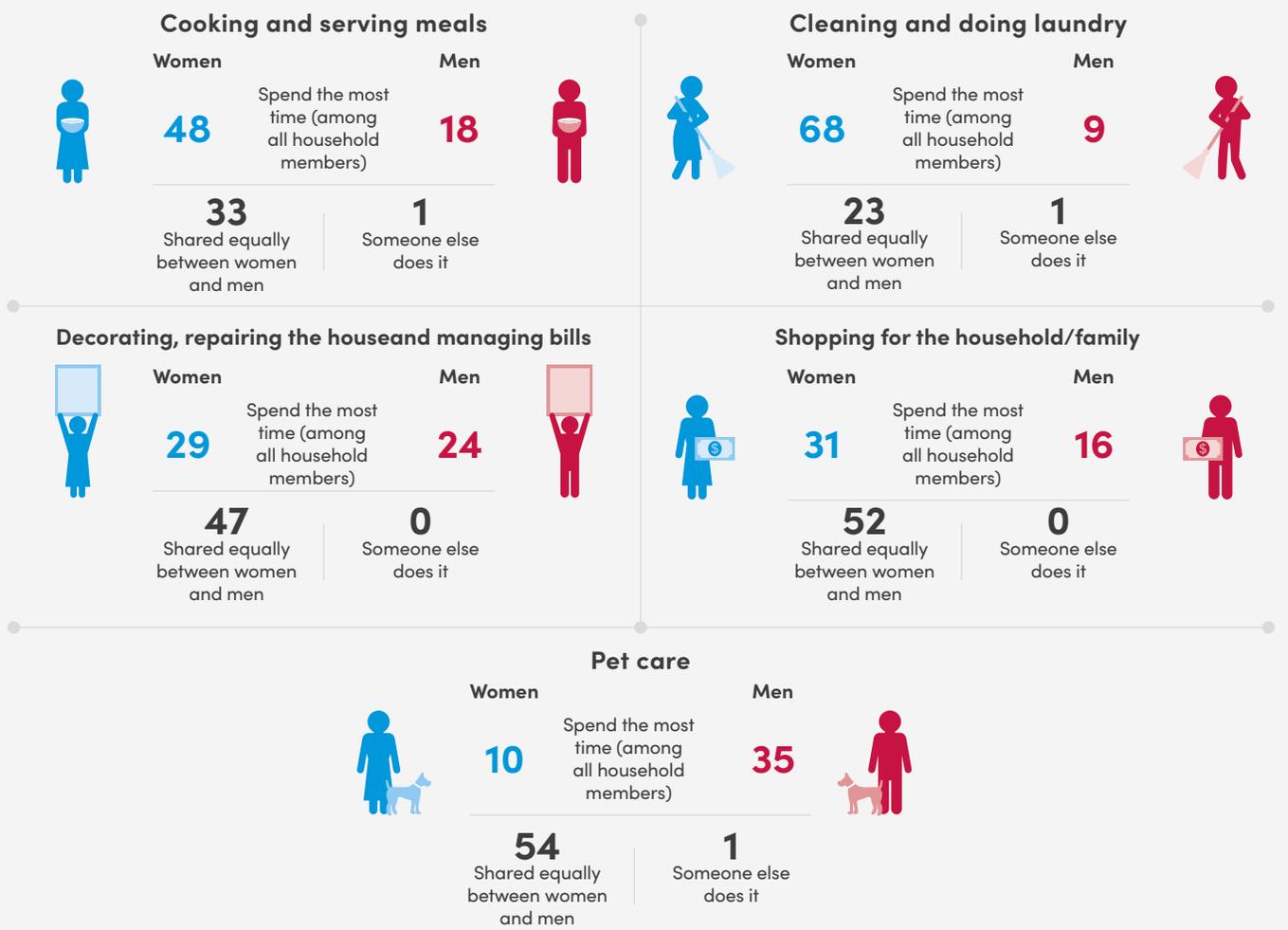
Note: Food hardship measures the lack of access to food in enough quantity or quality. Data collected utilizing FAO FIES questionnaire sequence were analysed using the Rash model to assess the performance of the scale. The data passed the statistical validation tests, and the raw score (the number of affirmative answers to the eight questions) can be considered as an ordinal measure of food security. Therefore, an individual is considered as experiencing food hardship if the raw score is four or higher. At this raw score the probability of experiencing food hardship is higher than 50 per cent.

# COVID-19 MULTIPLIED UNPAID CARE AND DOMESTIC WORKLOADS, BUT REDISTRIBUTION OF TASKS DID NOT TAKE PLACE

Women, overall, are more likely to take on domestic and care chores at home (figures 13 and 14). In Samoa, women take on most of the cooking, cleaning and supervising of children, while men are more likely to take care of pets.<sup>7</sup> When it comes to other care work activities, many households in Samoa share the tasks between men and women.

The onset of the pandemic multiplied these responsibilities. An estimated 27 per cent of people noted that children missed school because they lacked access to remote learning technologies or they were unable to pay for schooling (figure 15). More women than men are in charge of teaching children and managing related arrangements with schools.

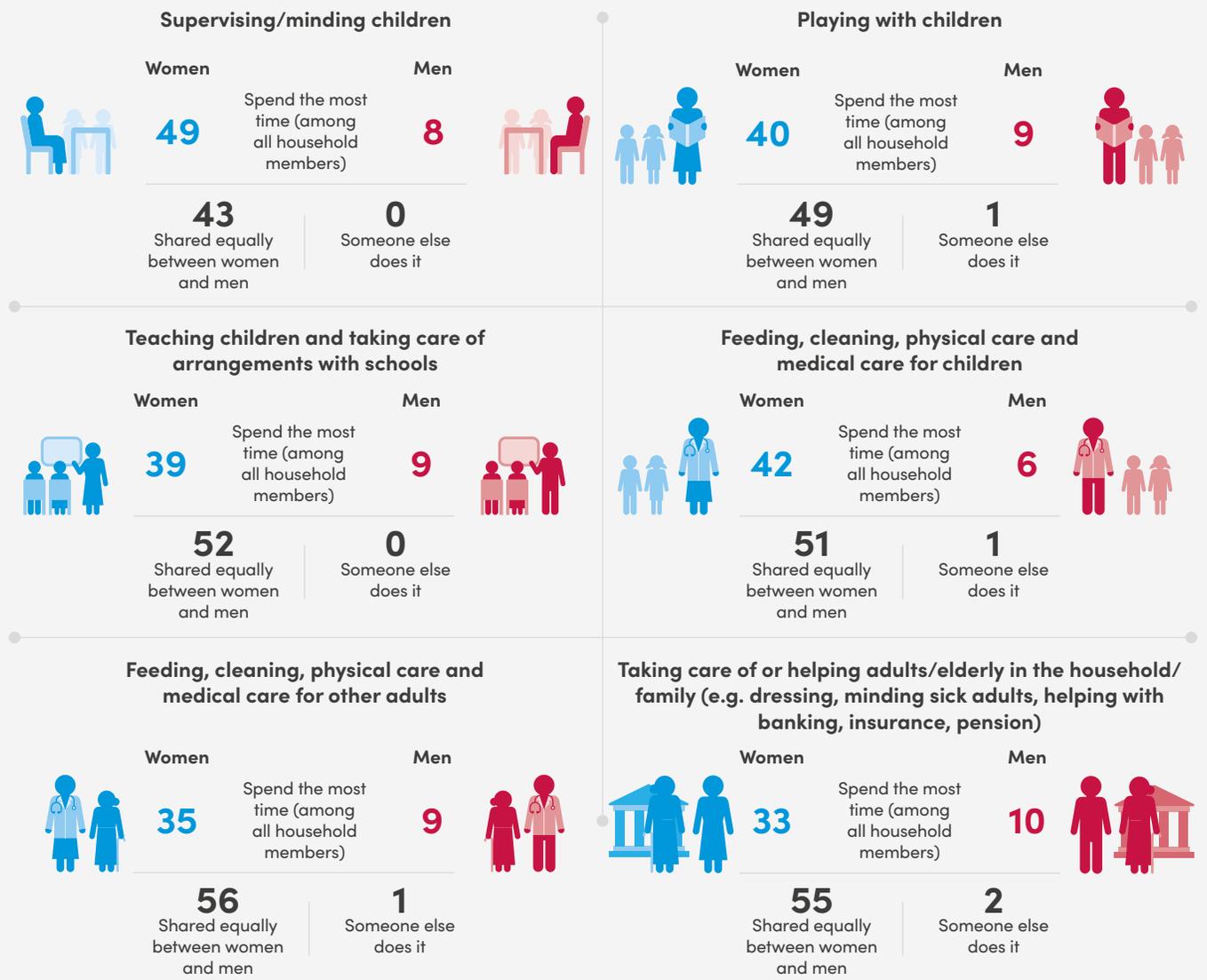
**Figure 13: Proportion of people who noted women/men in the household spend the most time performing different unpaid domestic work activities (percentage)**



Note: "Women in the household" refers to a clustered category of women respondents who reported being primarily in charge of the activity and respondents of any sex who reported a female household member was primarily in charge of the activity. "Men in the household" refers to a clustered category of men respondents who reported being primarily in charge of the activity and respondents of any sex who reported a male household member was primarily in charge of the activity. "Shared equally between women and men" refers to respondents who reported an activity is equally undertaken by women and men in the household. "Someone else does it" refers to non-household members. Respondents who reported that the activity does not take place in the household, or indicated they did not know, or refused to answer were excluded from the analysis. Estimates should be interpreted with caution when the number of respondents is less than 25, including respondents who indicated "Someone else does it" in the analysis of: 1) decorating, repairing and managing bills; 2) shopping for family; and 3) pet care. All gender differences are statistically significant (p<0.05) for all unpaid domestic work activities.

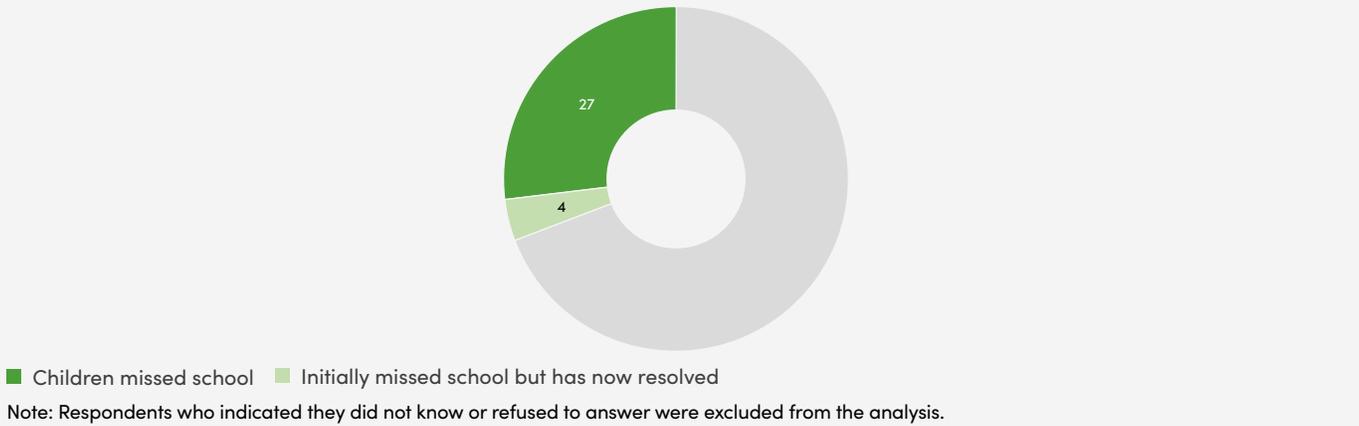
<sup>7</sup> It is likely that in Samoa, "pets" was interpreted to include farm animals (e.g., pigs) living on the household premises and raised for own final use.

**Figure 14: Proportion of people who noted women/men in the household spend the most time performing different unpaid care work activities, (percentage)**



Note: "Women in the household" refers to a clustered category of women respondents who reported being primarily in charge of the activity and respondents of any sex who reported a female household member was primarily in charge of the activity. "Men in the household" refers to a clustered category of men respondents who reported being primarily in charge of the activity and respondents of any sex who reported a male household member was primarily in charge of the activity. "Shared equally between women and men" refers to respondents who reported an activity is equally undertaken by women and men in the household. Respondents who reported that the activity does not take place in the household or indicated they did not know or refused to answer were excluded from the analysis. Estimates should be interpreted with caution when the number of respondents is less than 25, including respondents who indicated "Someone else does it" in the analyses of teaching children and taking care of arrangements with schools and feeding, cleaning, physical care, and medical care for dependent and non-dependent adults. Gender differences are statistically significant ( $p < 0.05$ ) for all unpaid care work activities.

**Figure 15:** Proportion of people who noted that children living in the household missed schooling due to a lack of access to remote learning technologies or inability to pay for schooling (e.g. fees/supplies) since the onset of COVID-19 (percentage) (n=1,868)

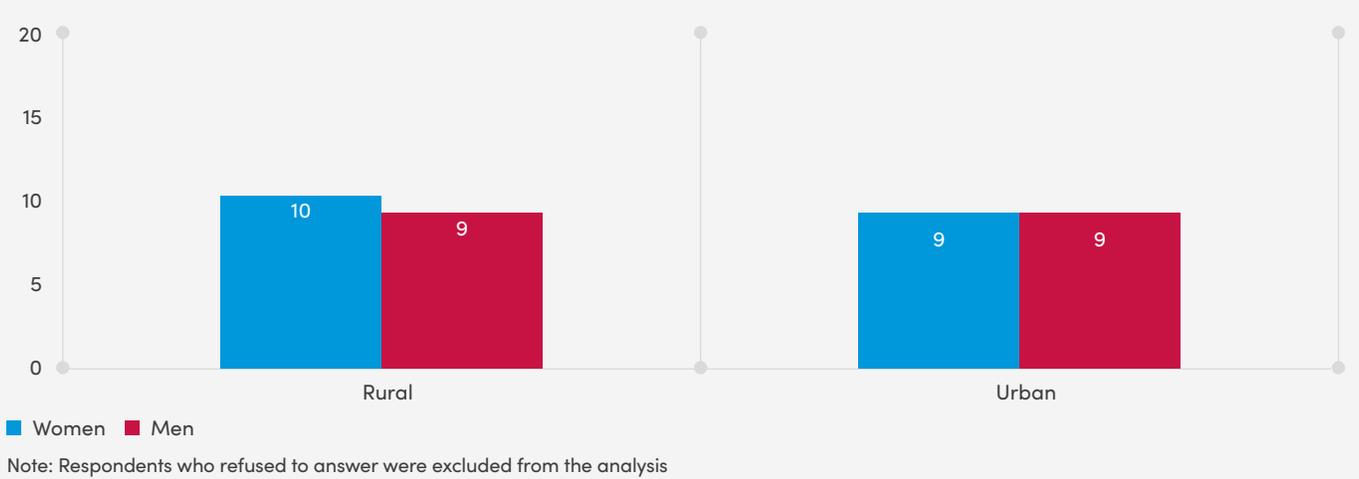


## THE PANDEMIC HAS OVERLAPPED WITH ENVIRONMENTAL CHALLENGES, MAKING IT HARD FOR WOMEN AND MEN TO COPE

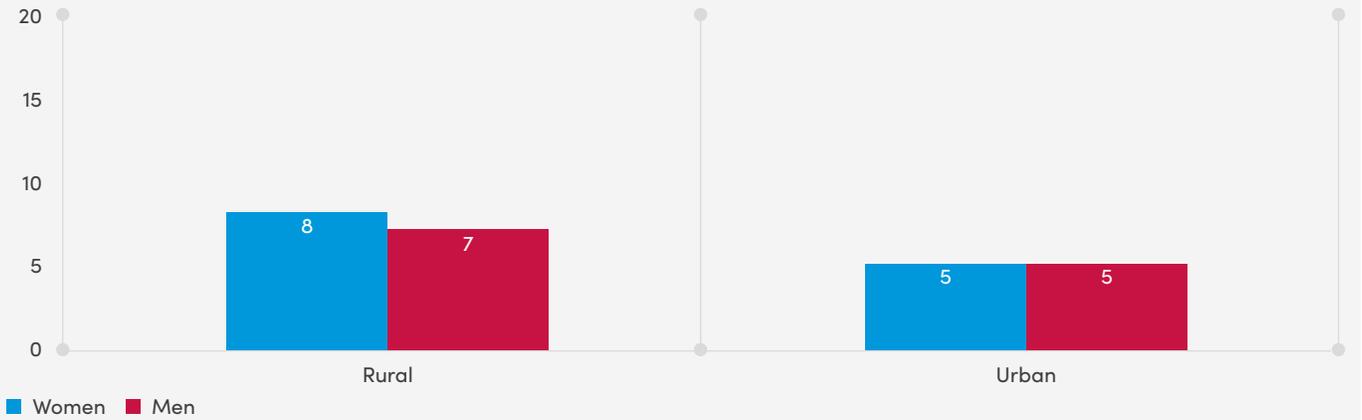
Natural hazards, such as typhoons and other extreme weather events have overlapped with the pandemic. This, coupled with changes in the availability of public transportation (figure 16), affected access to natural resources for women and men. In Samoa, an estimated 7 per cent of women and 6 per cent of men noted that their access to water sources was compromised since the onset of COVID-19, with rural areas being more affected

than urban areas (figure 17). For 37 per cent of people, affordability was the main barrier to accessing water sources, whereas 32 per cent of people noted that piped water supply was available only on certain days. In most households in Samoa, water collection chores are shared between women and men (figure 18). In addition, 4 per cent of people noted losing access to power. Fuel collection, for the most part, falls to men (figure 19).

**Figure 16:** Proportion of people who lost access to public transportation since the onset of COVID-19, by sex and location (percentage) (n=2,141)

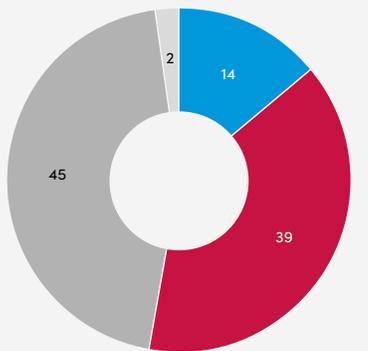


**Figure 17:** Proportion of people whose water source was compromised since the onset of COVID-19 and continues to be, by sex and location (percentage) (n=2,140)



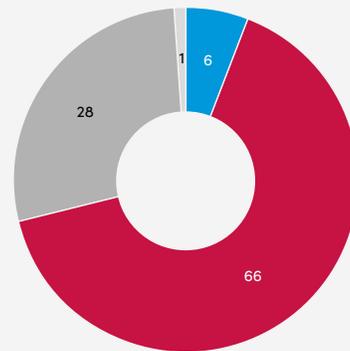
Note: All urban estimates for Samoa should be interpreted with caution as the number of respondents with compromised water sources is less than 25.

**Figure 18:** Proportion of people who noted women/men spend the most time fetching water (percentage) (n=918)



■ Women in the household 
 ■ Men in the household  
■ Shared equally between women and men  
■ Someone else does it

**Figure 19:** Proportion of people who noted women/men spend the most time collecting fuel/firewood (percentage) (n=1,448)



■ Women in the household 
 ■ Men in the household  
■ Shared equally between women and men  
■ Someone else does it

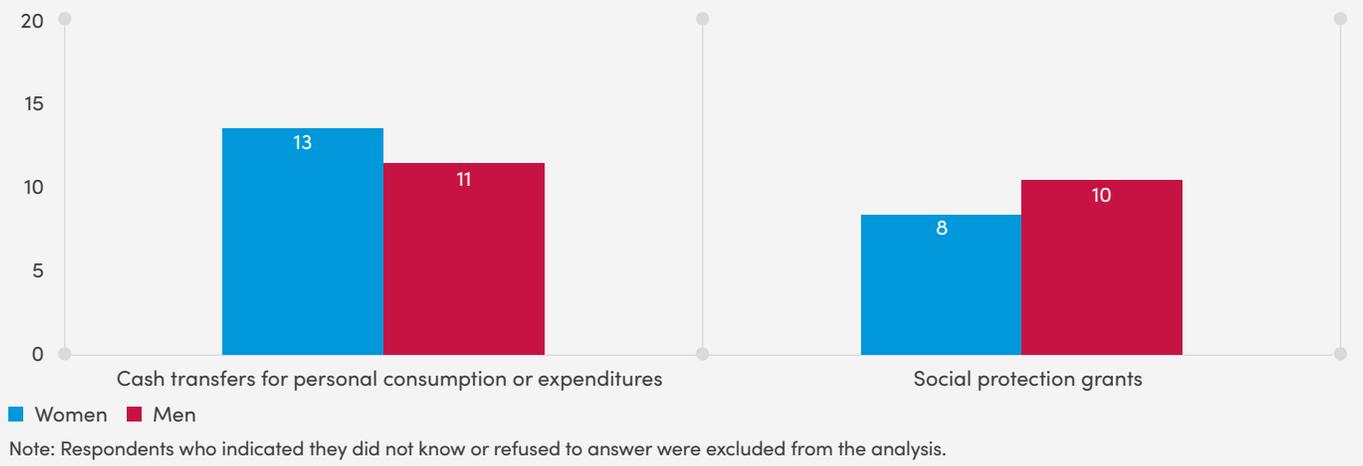
Note: "Women in the household" refers to a clustered category of women respondents who reported being primarily in charge of the activity and respondents of any sex who reported a female household member was primarily in charge of the activity. "Men in the household" refers to a clustered category of men respondents who reported being primarily in charge of the activity and respondents of any sex who reported a male household member was primarily in charge of the activity. "Shared equally between women and men" refers to respondents who reported an activity is equally undertaken by women and men in the household. Respondents who reported that the activity does not take place in the household, indicated they did not know, or refused to answer were excluded from the analysis. Estimates for "Someone else does it" should be interpreted with caution as the number of respondents is less than 25. Gender differences are statistically significant for both activities for Samoa ( $p < 0.05$ ).

## GOVERNMENT SUBSIDIES AND OTHER SUPPORT ARE INACCESSIBLE TO MANY

COVID-19 affected the livelihoods of people around the world, including in countries where the virus did not spread substantially. In response to the pandemic, the Government of Samoa set up subsidies targeted to retired individuals specifically, as well as aiming to support small and medium-sized enterprises,<sup>8</sup> but access to these benefits has been limited, with some gender differences. Among all forms of government support, cash transfers and social protection grants had the furthest reach (figure 20).

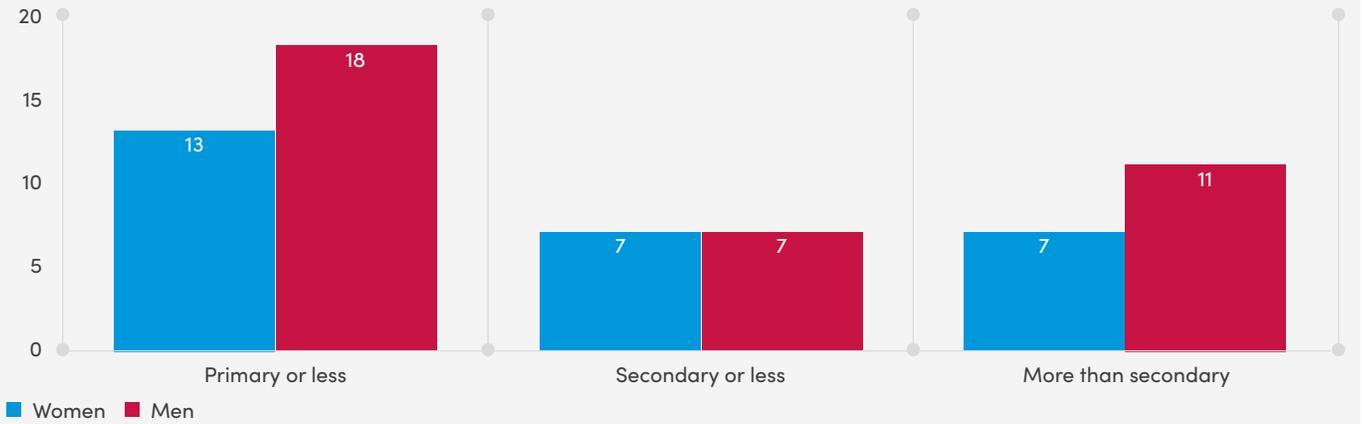
In the absence of wealth data, analysis by educational attainment shows that people with lower levels of education have benefitted more (figure 21). Other measures, such as the distribution of food or agricultural inputs, supplies of personal protective equipment and distribution of hygiene products, have reached very few in Samoa (figure 22). Women benefitted more from cash transfers, and men benefitted more from social protection grants.

**Figure 20:** Proportion of people who received government support since the onset of COVID-19, by sex and type of support (percentage) (n=2,132 cash transfers; n=2,136 social protection grants)



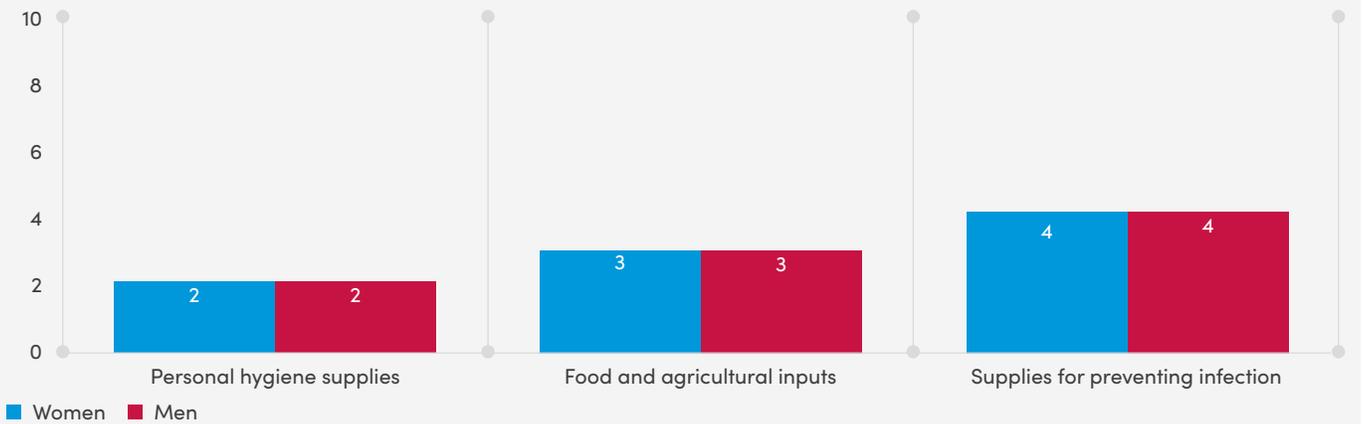
<sup>8</sup> For further information, please see: [https://reliefweb.int/sites/reliefweb.int/files/resources/WSM\\_Socioeconomic-Response-Plan\\_2020.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/WSM_Socioeconomic-Response-Plan_2020.pdf)

**Figure 21: Proportion of people who received social protection grants since the onset of COVID-19, by sex and education level (percentage) (n=1,064)**



Note: Education levels have been classified into three categories, "Primary or less" includes all respondents who received no formal education, some primary education and those who completed primary school. "Secondary or less" includes all respondents who received some secondary education and those who completed secondary school. "More than secondary" includes all individuals who received technical and vocational training, some university/college education, some post-graduate education and those who completed university/college education and post graduate education. Respondents who indicated they did not know or refused to answer were excluded from the analysis. Estimates for "Primary or less" should be interpreted with caution as the number of respondents is less than 25.

**Figure 22: Proportion of people who received government support in the form of personal hygiene supplies, food or agricultural inputs and supplies for preventing infection, by sex (percentage) (n=2,137 personal hygiene supplies; n=2,139 food and agricultural inputs; n=2,139 supplies for preventing infection)**



Note: For receiving personal hygiene supplies as government support, estimates should be interpreted with caution as the number of respondents is less than 25. Respondents who indicated they did not know or refused to answer were excluded from the analysis.

## ANNEX I: UNWEIGHTED SAMPLE DISTRIBUTION IN SAMOA (PERCENTAGE) (N=2,142)

	Women	Men
<b>Total</b>	50	50
<b>Location<sup>6</sup></b>		
Urban	32	34
Rural	68	66
<b>Age group<sup>7</sup></b>		
18–28	28	31
29–39	27	25
40–50	22	22
51–61	14	12
62+	10	9
<b>Marital status<sup>8</sup></b>		
Married	71	65
Married but separated	1	1
Widowed	4	2
Divorced	1	1
Single (never married)	23	32
<b>Education</b>		
Some primary education	4	5
Primary education	3	3
Secondary education	50	50
Vocational/ college	23	25
Tertiary education	20	17
<b>Disability</b>		
Self-reported	20	15

6 Urban/rural location is self-declared. Population who noted they reside in cities or towns have been considered urban dwellers for the purpose of this analysis. This classification may differ from that used in official statistics in Samoa.

7 Due to rounding, percentages may not total 100.

8 Due to rounding, percentages may not total 100