

The Impact of COVID-19 on Families in Urban and Rural Haiti

RESEARCH REPORT



SUMMARY

In July and August 2020, the [Interuniversity Institute for Research and Development](#) (INURED) conducted a mixed-methods, exploratory study on the impact of the COVID-19 pandemic on Haiti. This report explores the economic impacts, labour and educational disruptions, as well as the disparate effects of the pandemic across social and gender lines on urban and rural households in Haiti.

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Executive summary

Current studies have demonstrated the profound yet, uneven impacts of the COVID-19 pandemic on populations around the world. It is well known that disasters such as epidemics and their accompanying socioeconomic and political consequences have greater impacts on marginalized populations. In contexts such as Haiti, where government institutions have limited resources and capacity to enforce public health measures that would reduce the spread of the virus, the generation and dissemination of knowledge on the pandemic's impact is critical. The current report is a contribution in this light, attempting to fill some of these knowledge gaps, particularly in the area of livelihoods and remittances, violence against women and girls, primary education and home-schooling experiences, and community perceptions of and stigma associated with COVID-19.

This report examines the impacts of the COVID-19 pandemic on households in urban and rural Haiti. It provides the results of a mixed-methods, exploratory study on the multidimensional impacts of COVID-19 on households focusing on key cross-cutting themes. The methodologies employed included quantitative and ethnographic approaches, specifically household survey data (n = 511), focus groups, in-depth interviews, ethnographic observations, social mapping, and remittance data from the Haitian central bank.

Principal results from the study indicate a dire situation in terms of the impacts of the pandemic on households and the most vulnerable in Haitian society, including the poor, women, and girls. The pandemic arrived on the heels of political and economic crises, intensifying pre-existing conditions of vulnerability while further disrupting daily life. In addition, the study unearths the disparate impacts of the pandemic on urban and rural households, suggesting that although the public health risks in densely populated urban areas may be higher, the economic impacts on rural populations are, in many ways, more devastating. Moreover, our findings show that, although there were widespread predictions on the part of large, multilateral institutions that the remittance economy would suffer significant decreases, this was not the situation in Haiti, where year-on-year transfers increased in 2020. Remittances from key destination countries in the Global North, such as the United States and Canada, proved to be a vital mitigating force during the pandemic, whereas remittance transfers from the Global South decreased during the crisis.

The public health emergency created by COVID-19 in Haiti has compounded protracted political and socioeconomic crises - known as *peyi lòk* - that had already resulted in weeks of business and school closures in the latter part of 2019 and beginning of 2020. Ultimately, the pandemic serves as both an indicator and magnifier of existing marginalization and structural violence in the country.

Foreword

In April 2020, in the midst of a lockdown adopted by Haitian officials to contain the COVID-19 pandemic in Haiti, the leadership of the Interuniversity Institute for Research and Development (INURED) took the unprecedented step of mobilising its resources to study the impact of the public health emergency on the Haitian population. At the time, there was shared concern, if not near certainty, that countries such as Haiti would be unfairly burdened by the pandemic, crippled as they already are by global predatory capitalism, structural violence, chronic inequalities and inequities and systemic institutional weaknesses.

COVID-19 hit Haiti at a moment in which the majority of the population already faced a challenging present and a future that was difficult to predict. Socioeconomic and political conditions exacerbated vulnerability, making the COVID-19 public health crisis a recipe for yet another disaster. Despite the efforts of dedicated Haitian public health professionals, clinicians, community health practitioners, and local advocates, the already fragile national health system may soon collapse. A national survey of critical health facilities in Haiti reported that there were only 124 Intensive Care Unit (ICU) beds in the country, with a capacity to ventilate 62 patients within ICUs and six patients outside of them (Losonczy et al., 2019). In addition, HIV prevalence varies between 1.5% and 2.7% (EMMUS, 2018), depending on the region, and other comorbidities, including cardiovascular diseases, respiratory infections, and diabetes are so prevalent in urban and rural Haiti that, for many people, surviving COVID-19 would be near miraculous.

Still, despite the severity of the threat, Haitians are stoically navigating the days ahead, at times denying the imminent and inherent risks that the pandemic brought with it. In the streets, most Haitians were preoccupied by other, presumably more immediate, threats: they would say "...either I die of COVID or I die of hunger," reflecting the reality that, in 2019, 2.6 million Haitians were food insecure (FEWS NET, 2020). Hunger was so dire that stunting affected 4% of children under the age of five, and 10% of children under age five were underweight (EMMUS, 2018). Further threatening the health and increasing the suffering of poor families was the forecasted rise in the cost of staple foods that has now come to fruition (World Food Programme [WFP], 2020).

Another serious factor affecting Haitians' vulnerability to the pandemic is loss of remittances, as those living in other countries faced their own COVID-19-related economic hardships. Fearing the loss of the most basic means of survival during the pandemic, debates and concerns regarding remittance disruptions predominated. Both Haitians in Haiti and analysts of good faith believed the consequences of such disruptions were cause for serious concern for families in urban and rural areas of Haiti. With a significant portion of Haiti's remittances originating in the US, Haiti would suffer the ripple effects of the economic shocks affecting Haitians there. Prior to the pandemic, many migrants in the US lived on the margins. More than one-third (35%) earned less than USD \$20,000 per year, one-fifth were uninsured, and that number rises to 32% for the undocumented (Orozco, 2020). It was anticipated that as many as 595,000 migrants in the US would become unemployed as a result of the pandemic. Such vulnerability suggests that the migrant population in the US faces two risks: that of unemployment or increased exposure to infection with limited access to medical care or the financial means to seek it out (Gerdin & Kolev, 2020). The uncertainties that the pandemic produced crossed borders, as at home and abroad many Haitian families must confront various forms of vulnerability.

COVID-19 also hit Haiti in the midst of a pre-existing socioeconomic and political crisis. As the introduction of this report details, COVID-19 falls within a continuum of human tragedy and social and political cynicism, wrapped in the cold social indifference of Haiti's social, economic, and political elites. The protracted crises have morphed during the last two decades, culminating in a situation locally

referred to as *peyi lòk*—country in lockdown—that had already forced business and school closures in the months leading to the pandemic.

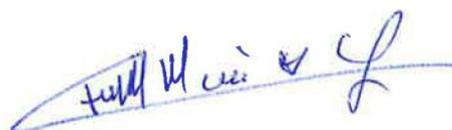
Empowered by historical impunity, emboldened by international indifference and silence towards human rights abuses, deprived of any sense of restraint, many political and economic actors consolidated their hold on power by collaborating with marginalised and jobless young men (and sometimes young women) to create a daily climate of terror for the average citizen through serial acts of kidnappings, robberies, home invasions, and bribery (RNDDH, 2020).

The COVID-19 pandemic offers Haiti and Haitians an opportunity to think through the country's human-made fragilities, inequalities, and inequities. It mirrors the challenges confronted by many societies in the Global South facing a predatory and racist global capitalist system that shows no regard for nationality or geographic location—in the inner-periphery of the Global North or in the most marginalised parts of the Global South.

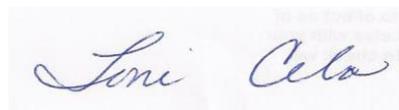
Obviously, Haiti and many countries that share similar conditions have not collapsed during the pandemic. Indeed, compared to other countries in Latin America, the Caribbean, and the rest of the world, reported cases of infections and mortality rates are relatively low (Johns Hopkins University, 2020); however, misery, suffering, abuses and inequities abound. This reality shackles many of Haiti's vulnerable population while forcing others to migrate in search of opportunities abroad.

INURED is a member of one of the greatest networks of migration researchers in the world, the Migration for Development and Equality (MIDEQ) hub funded by the UK Research and Innovation (UKRI) Global Challenges Research Fund (GCRF). We thank the UKRI/GCRF for their financial support which has made this study possible.

All research questions, the methodological design, and analysis, were a collective enterprise. We thank our courageous junior researchers who placed themselves at risk to gather the data for this analysis in the midst of a pandemic. They include, in alphabetical order, Kethia Charles, Psychologist; Pierre-Rigaud Dubuisson, Anthropologist/Sociologist; Dabouze Estinvil, Sociologist/Ethnographer; Mário Da Silva Fidalgo, Geographer/Data Analyst; and Orluche Fortin, Sociologist.



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Children playing along a canal in Raboto, Gonaïves, Haiti.

1. INTRODUCTION

As 2019 came to a close and 2020 began, concern for the COVID-19 virus intensified around the globe. By mid-March 2020, countries across the Americas would adopt a number of measures in an effort to slow the spread of the virus. Haiti would join their ranks on March 19, 2020, closing its airspace and terrestrial borders, imposing a national curfew, closing schools and non-essential businesses, and announcing that mask and social distancing requirements would be enforced in public places. However, lack of resources, weak governance, and lack of institutional legitimacy would make enforcement of these measures tenuous, at best, and, in many cases, impossible.

In order to deepen our understanding of the impact of COVID-19 on families in urban and rural Haiti, the Interuniversity Institute for Research and Development (INURED) implemented a study from June 1st to August 14, 2020. The study combined quantitative methods (a survey implemented in 5 regions of Haiti) and ethnographic fieldwork that included focus groups, interviews with selected household members, observations (where possible), and social mapping. Topics focused on the perceptions of and stigma associated with the COVID-19 pandemic as well as the impact of the pandemic on: livelihoods; household remittances; women; and primary education, specifically school disruptions. Drawing on the data collected in this study, this publication analyses the impact of the COVID-19 pandemic on the average Haitian family.

First, before exploring the methodology and presenting study findings and analysis, it is critical to situate the sociohistorical processes that underlie the dynamics of the COVID-19 pandemic in Haiti. These processes will help illuminate the individual and collective attitudes toward and responses to this global public health crisis. In the following section, we briefly examine how the COVID-19 pandemic reconfigures the narratives of risk and disaster among the Haitian population.

1.1 COVID-19 AND DISASTER VULNERABILITIES IN HAITI

Haiti has been designated one of the countries most vulnerable to disasters (World Bank, 2015; INURED, 2017a), making the threat of disaster ever present for its inhabitants. The threat of COVID-19 spread in Haiti presents many challenges for the resource-poor island nation. Located along two major fault lines and in a hurricane zone, Haiti's risk is also exacerbated by centuries of environmental degradation and poor urban planning. As a consequence, Haiti has suffered a number of disasters over the past three decades from which it has yet to recover (INURED, 2017a; Marcelin et al., 2016). These include 20 named major hurricanes prior to the January 2010 earthquake (see **Figure 1**).

FIG 1. Haiti at the Crossroads of Key Hurricane Trajectories in the Caribbean: from 1980 to 2008, (Petley, 2010).



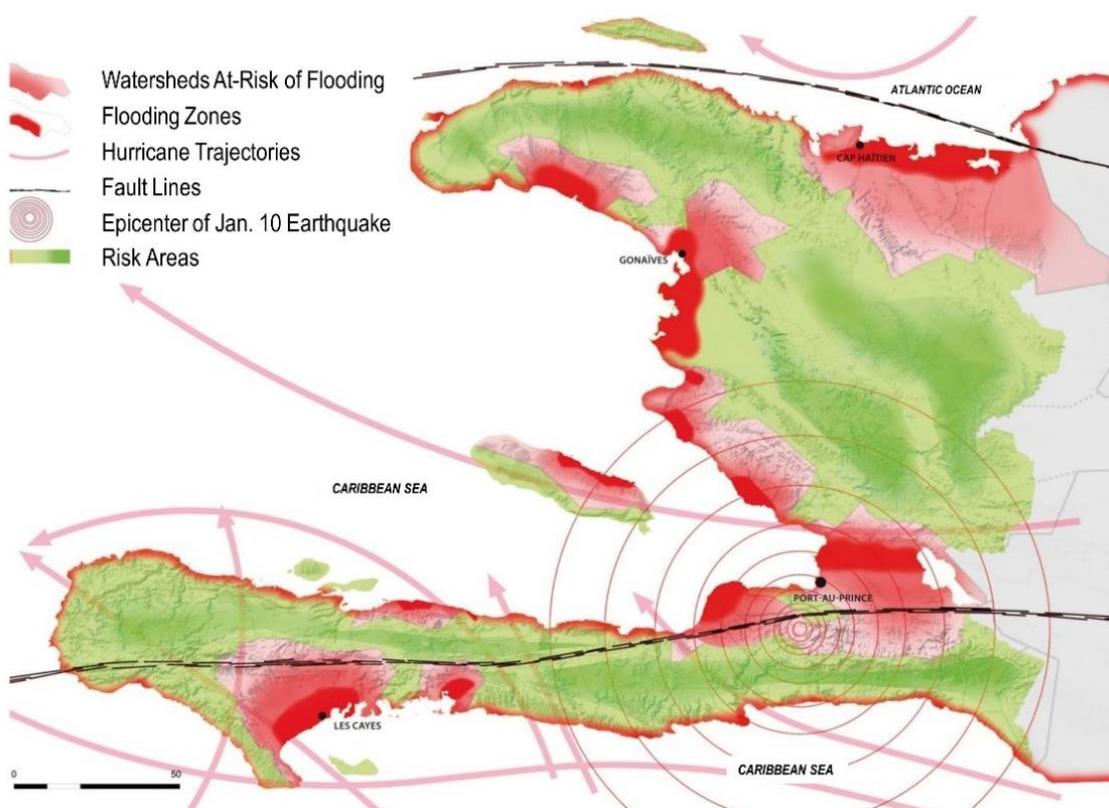
In January 2010, an earthquake claimed more than 250,000 lives and the cholera outbreak brought to Haiti by United Nations Peacekeeping troops in October 2010 would infect upwards of 800,000 and claiming the lives of more than 10,000 Haitians in just under a decade. As the map below from the Ministry of the Interior illustrates (**Figure 2**), Haiti's topography, unplanned land use, accelerated flooding due to soil erosion and unprotected watersheds, and depleted infrastructure exacerbate the threat of climate change as a "threat multiplier" (Jorstad & Webersik, 2016) in that it compounds the complex vulnerability of its population (INURED 2017a).

Combined, these disasters and associated environmental risks have made complex emergencies an existential threat for Haitian society and its core institutions. They have affected 3.5 million Haitians, almost one-third of the nation's population (Marcelin et al., 2016).

Unfortunately, the sheer number of disasters Haitians have had to endure over the past two decades has contributed to resignation, and in some cases, apathy. These realities have informed the public's understanding of and behavioural responses to the COVID-19 pandemic. Yet, this additional public health crisis presents significant challenges, as quality healthcare remains largely inaccessible to the average Haitian for a myriad of reasons, including the prohibitive cost of healthcare and medications, the challenging distances many are required to traverse in order to access most- and better quality-health services, the low ratio of healthcare professionals per capita, as well as an urban/rural divide (Perge & Touray, 2017). This makes the COVID-19 a serious concern for all sectors in Haitian society. As demonstrated by the cholera outbreak, which was deemed one of the largest in modern history

(DINEPA, 2013), the nation’s healthcare system’s capacity to respond to an epidemic is severely limited. Therefore, examining the impact of this potential public health disaster on Haitian families is critical as the nation is still rebuilding from the earthquake, facing yet another political crisis- largely the result of government corruption associated with *PetroCaribe* funds (Ahmed, 2019; Paultre, 2019), and a political and social leadership vacuum incapable of creating a coherent vision for development, human security and effective governance. The pandemic also emerged during an economic crisis spurred by the International Monetary Fund’s (IMF’s) sudden plan to withdraw fuel subsidies in 2018 (Paultre, 2019; Reuters, 2018), an artificial appreciation of the Haitian gourde and devaluation of the US dollar in fall 2020 (Charles, 2020), as well as the cold indifference of Haiti’s historic “partners”, largely countries and multilateral institutions from the Global North, to the pathologies of Haiti’s elites’ exercise of power and influence over the country’s politics which have accelerated poverty and the degradation of human life in the country (Dubois, 2013; Dupuy, 2019; Farmer 2004; Marcelin & Cela 2019). This mixed-methods, exploratory study examines the COVID-19 pandemic, Haitian perceptions of the disease, as well as its impact on livelihoods and remittances, violence against women and girls during the pandemic, and school disruptions resulting from the public health crisis. In addition to ongoing natural disasters and health care crises, it is also crucial to recognize the continuum of socio-political processes and structural violence that contribute to the fragility of life in Haiti.

FIG 2. Haiti: A Geography of Risks and Natural Disasters, (Ministry of the Interior)



1.2 COVID-19 AND THE ENTANGLEMENT OF VIOLENCE

Systemic socio-political crises fuelled by fragmented factions of Haitian elites have produced a culture of violence that has, in turn, generated an ecology of despair, economic bankruptcy, and complex vulnerabilities in Haiti (Dupuy, 2019; Marcelin & Cela, 2017). Structural violence linked to political crises before and during the pandemic has had a considerable impact on how COVID-19 is managed. Indeed, for some time, there has been an increase in violence and insecurity in Port-au-Prince and some provincial towns. Groups of heavily armed young people, with links to various political and criminal factions, have taken charge of the local governance of territories. These quasi-political and criminal governance arrangements have torn communities apart by placing the daily lives of populations in tumult (Geffrard, 2019). Armed attacks perpetrated by allied and rival gangs have been recorded in certain disadvantaged neighbourhoods of the capital. In a report published on June 23, 2020 by the National Network for the Defense of Human Rights (RNDDH), in several neighbourhoods in Port-au-Prince's metropolitan areas, namely Pont Rouge, Chancerelles, Wharf Jérémie, Fort Dimanche, La Saline, and Nan Tokyo, the continuous firing of automatic weapons was reported between May 23 and 27, 2020. At the time of the redaction of this publication, the toll of these clashes between armed gangs and attacks perpetrated against neighbourhood populations has resulted in at least 34 deaths and 10 people wounded by bullets during the pandemic (RNDDH, 2020). However, the same document also reported acts of violence perpetrated by armed gangs prior to the pandemic, from 2019 to 2020, in the aforementioned underprivileged neighbourhoods, and sometimes on behalf of those in power and in the presence of the Haitian National Police (RNDDH, 2020). Between November 2018 and December 2019, in La Saline and Nan Tokyo, two working-class neighbourhoods of Port-au-Prince, 136 people were murdered, 11 women and girls raped, and more than 7 people reported missing (ibid).

The United Nations Integrated Office in Haiti (BINUH) expressed concern at the upsurge in acts of insecurity in the country. Indeed, sharing data from the latest United Nations report on Haiti, the BINUH indicates that: "After declining steadily since March [2020] to reach a monthly average of 3.5, the number of kidnappings rose to 19 in July [2020], gangs have returned to more lucrative activities after weeks of intense negotiations and clashes. A total of 32 people (including 9 women and 3 children) were abducted, compared to 25 during the previous three months (including 7 women and 7 children), which represents an increase of 28%" (Alphonse, 2020).

The country's authorities seem overwhelmed by the upsurge in insecurity. Day and night, kidnappings, assaults, robberies, and street executions are performed with impunity. In the metropolitan area, as in provincial towns, no one is immune from the terror of armed groups (Geffrard, 2020). Daily acts of violence culminated in the kidnapping, sexual assault, and assassination of a young student, Evelyne Sincère, on November 1, 2020. This reprehensible act, decried by communities across Haiti, led to unprecedented mobilization against rampant impunity and the absence of the rule of law in Haiti (Geffrard, 2020; Alter-Pressé, 2020). The climate generated by COVID-19 has reconfigured the dynamics of socio-political instability in the country, magnifying human suffering while heightening uncertainty about the future. However, structural violence, marginalization, and extreme vulnerability has had the perverse effect of generating apathy toward the pandemic and, in some cases, COVID-19 denial. Under these conditions, attention to COVID-19, in many ways, takes a backseat to concerns over violence, to the point that some citizens ironically suggest that it would be more useful to mandate wearing bullet-proof vests over sanitary masks. These contextual events, however alarming and debilitating for Haiti's democratic future, have characterized the country's recent turbulent years. They are indeed profoundly rooted in the country's long history of impunity, social indifference, and predatory practices (Fatton, 2002). We briefly outline these connections in the next section.

1.3 PEYI LÒK: HAITI IN A STATE OF PERPETUAL CRISIS

In September 2019, various factions of Haiti's political opposition clashed with the country's government over the Petrocaribe scandal. It was the latest in a series of demonstrations that began in the summer of 2018 over a 40 percent hike in fuel prices and double-digit inflation that has made daily life extremely challenging for most people. In 2006, Venezuela, home of the world's largest oil reserves, offered Haiti the capital needed for investment in infrastructure development, education, agriculture, health, and entrepreneurship. Along with 17 other Caribbean countries, Haiti benefited from what has been called the Petrocaribe deal, under which Venezuela provided cheap oil on favourable credit terms. Haiti has 25 years to pay back the debt at 1 percent interest. The total amount of this loan exceeds \$4 billion, representing money spent between 2009 and 2017, mostly under the presidency of Michel Martelly, the mentor of the current president, Jovenel Moïse. However, according to official reports in Haiti, more than \$2.3 billion has not been accounted for by local politicians and their allied ruling families. This is popularly known in Haiti as the Petrocaribe scandal. The scandal triggered a national protest movement referred to as "*peyi lòk*" (country in lockdown) from September to December 2019. The population erected barricades, blocking already impassable roads, and forced the closure of businesses and shops. During that time, the entire productive and active sectors in Haiti came to a halt. Approximately 70% of schools were closed. The provinces were cut off from the capital, crippling hospitals as they could not be supplied with equipment, medicines, and materials that originated in Port-au-Prince. Because of the barricades (roadblocks), access to health care became a significant challenge, with people dying in ambulances and behind barricades (Schüler, 2020).

The *peyi lòk* movement has exacerbated Haiti's economic problems. Haiti is one of the poorest countries in the world with a 2017 Gross Domestic Product (GDP) of USD \$783 per capita. According to the Economic Commission for Latin America and the Caribbean's (ECLAC's) regional economic report, 2019 represented Haiti's worst economic performance in a decade (Dubois, 2020). During that year Haiti recorded a growth rate of 0.7%, against 1.5% in 2018, a situation largely attributed to *peyi lòk*. The paralysis of activities due to the *peyi lòk* movement also forced companies to reduce their staff, resulting in an increase in the unemployment rate (ibid). It should, therefore, be understood that unlike the rest of the world, which began experiencing various forms of partial, and in fewer cases full-on, lockdowns in early 2020, Haiti has been experiencing intermittent shutdowns since fall 2019, with a two-and-a-half-month reprieve (January to March 19, 2020) before the global pandemic was officially declared in Haiti and states across the Americas.

Extreme political crises and related lockdowns have brought Haiti to its knees. In a Staff Report on the macroeconomic situation in Haiti published just before the rise of COVID-19, the IMF (2020) expressed concern regarding the outlook in Haiti, describing the situation as particularly "grim". Even without the effects of the pandemic, the IMF predicted a slight increase of economic growth compared to 2019, based on the assumption of some improvements in political stability since *peyi lòk* (ibid). The COVID-19 pandemic, however, is likely to result in even worse outcomes than those predicted by the IMF, as political instability has further intensified. The IMF briefly outlines how uncertainty and downside risks will certainly be profound due to these factors, worsening the intense political and economic degradation of the country that accelerated in early 2019. In other words, the already bleak and deteriorating political situation in Haiti—that peaked during *peyi lòk*—has been amplified by the global COVID-19 crisis and has resulted in a protracted, complex emergency in much of the country. It is this context of interrupted crisis that has shaped the COVID experience in Haiti and that constitute the backdrop of this study.

2. METHODOLOGY

In July and August 2020, the INURED implemented a mixed-methods study of the impact of COVID-19 on families in urban and rural Haiti. The study included a household survey ($n = 511$), five (5) focus groups, **twenty-five** (25) ethnographic interviews, observations, and social mapping. All participants were provided an oral explanation of the study in Haitian Creole, this method was chosen due to low literacy rates, particularly in rural areas. It was explained that their participation was voluntary and that they could withdraw from the study at any time. The study protocol was reviewed and approved by INURED's U.S. Department of Health and Human Services-approved Institutional Review Board.

To strengthen the investigation of the impact of the pandemic on remittances, INURED conducted statistical analysis of the Haitian Central Bank's remittance data from October 2017 to August 2020¹.

2.1 CONDUCTING FIELD RESEARCH DURING THE PANDEMIC

Due to the risks posed by the COVID-19 pandemic, INURED developed a health and safety protocol for the research team to follow to protect themselves and participants of the study. This protocol was developed based on the recommendations of Haiti's Ministry of Public Health and Population (MSPP) and the World Health Organization (WHO). All research team members were required to: wear masks while in the field; maintain social distance; use transparent gloves; and use hand sanitizer, where appropriate. A set of masks was provided to all research team members that could be used for the duration of their engagement in fieldwork, and one mask was offered to each study participant, which they were encouraged to wear during interviews. Overall, those who accepted to participate in the study were generally cooperative about applying these measures, which included wearing a mask and maintaining proper social distance.

Gathering study participants' perceptions about COVID-19 proved to be a serious challenge for the study's investigators. For the most part, Haitians do not believe that COVID-19 is real, let alone that it could be catastrophic if neglected. This perception is, in many regards, due to the population's lack of confidence in state authorities. For them, COVID-19 in Haiti is just politics. It is in this difficult context that the study was carried out: on the one hand, investigators had a health protocol that they were required to follow in order to protect themselves and respondents and, on the other hand, respondents did not accept the logic of the protocol because quite simply, for them, COVID-19 was something fictitious. In this case, therefore, it was difficult to scrupulously respect the health protocols pre-established by INURED in the field. When investigators wore masks or gloves, some respondents would mock researchers, saying that by behaving in such a manner they were attempting to convince people that COVID-19 is, in fact, real.



MIDEQ researcher, Orliche Fortin, interviewing a study participant in the Grande-Anse department, INURED 2020.

¹ This analysis was done in partnership with the *Institut Haïtien de Politiques Publiques*, INHOPP. We thank Gov. Fritz Jean for our partnership.

For example, some people did not want to accept masks that investigators offered them, and those who accepted them, held them in their hands instead of wearing them.

Participants' perceptions of Haitian politics and their loss of confidence in state authorities and some organizations has created reluctance in some to provide information. For example, there were several cases where people repeatedly asked investigators if they were not agents secretly working on the behalf of the powers that be and if the study was being carried out on behalf of political authorities. If so, they would categorically refuse to be interviewed. And, in fact, in some cases, despite explanations to the contrary and researcher identification badges, some potential respondents refused to participate for these reasons.



MIDEQ researcher, Dabouze Estinvil, interviewing a study participant in the Ouest department, INURED 2020.

In addition, investigators also encountered personal security challenges on the ground. Gang activity, which is beginning to spread to provincial regions once regarded as safe was a concern for our investigators, in particular in Chambellan, a town located in the department of Grand-Anse. After the first day of work in this locality, the local research team was informed of the presence of several dozen armed and hooded individuals circulating in the area. This situation posed a security risk both for our investigators and participants. In this case, the decision was made not to conduct face-to-face interviews, opting instead for telephone interviews. This solution was made easier by the fact that one of our investigators was a local resident of the area.

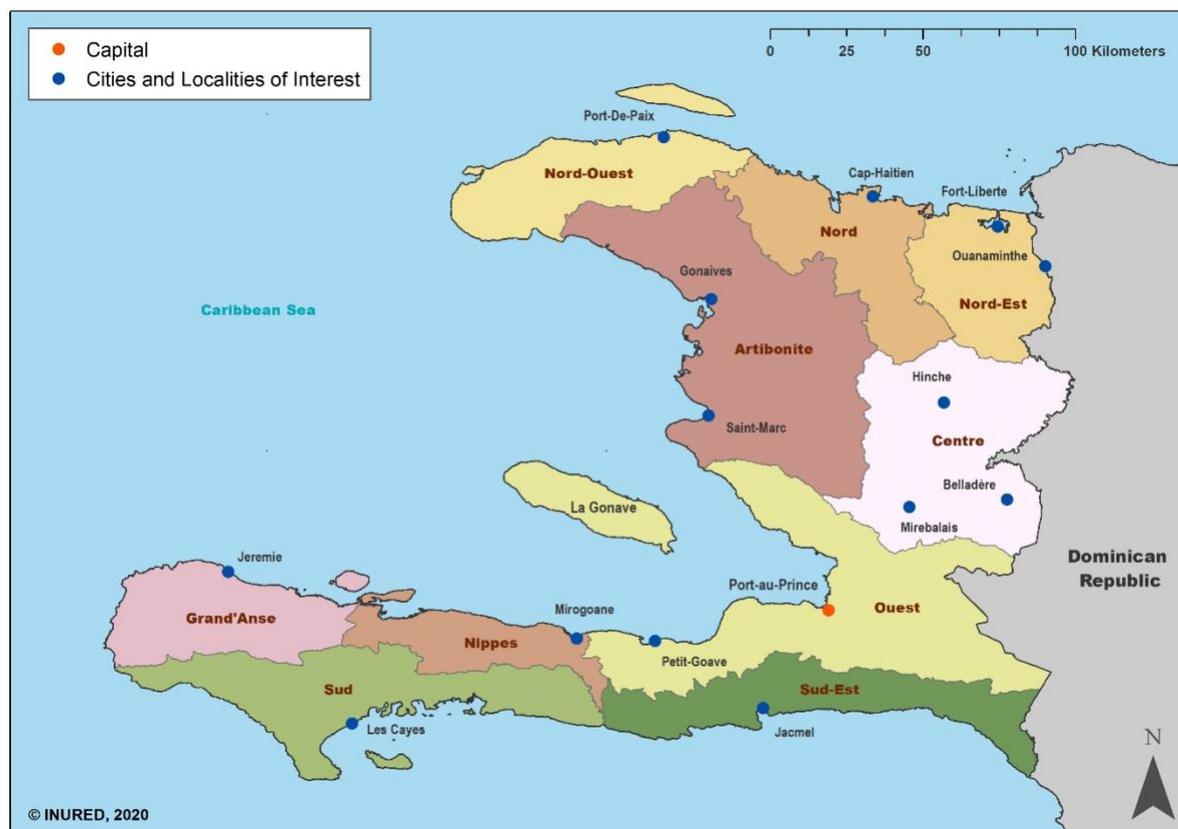
He was able to discreetly return to the study site to collect the phone numbers of the selected participants. This substantially reduced the time spent in the field and allowed us to protect our investigators. There were security issues in Delmas as well, where we saw several people threateningly display their guns. To facilitate the interviews in this neighbourhood, our investigators had to be accompanied by a guide recruited in the area.

2.2 OVERALL STUDY DESIGN AND SAMPLING FRAME

The household survey will be implemented from July 1st, 2020 to August 14, 2021. Ideally, the population frame for the survey would include all households in Haiti. However, based on data available on spatial distribution of migration prevalence, the population universe was selected from 5 geo-administrative departments (see map below and Appendix II).

The sampling frame was originally compiled by the Haitian Institute of Statistics and Informatics (IHSI). In preparation for various national surveys, the sampling frame was updated in 2011, and again in 2013 and 2015, to reflect the rapid transformation of cities and towns affected by the January 2010 earthquake (see Appendix II).

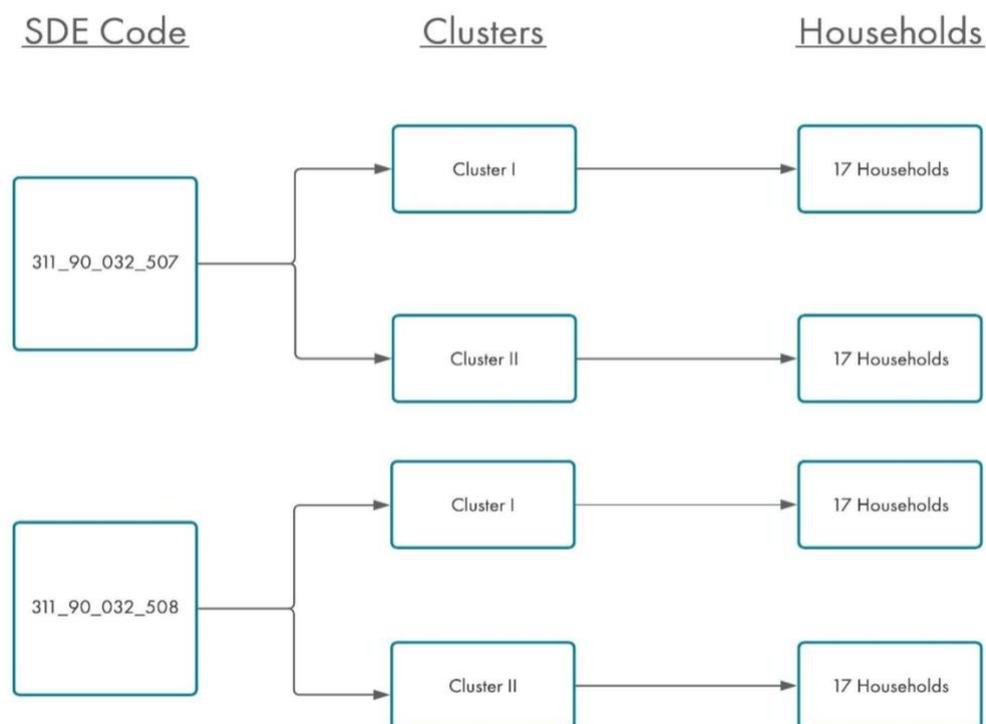
FIG 3. Administrative/Geographic Divisions of Haiti



Since a list of households is not available and considering the concentration of the population in several cities in the country, the preferred type of sampling scheme is cluster sampling in two stages at three levels. At stage one of stratification, five (5) cities and their surroundings (metropolitan areas) are selected randomly from a list of 15 major cities in Haiti from 5 departments highlighted in Table I. In these metropolitan areas three (3) are among the most densely populated in the country: Port-au-Prince, in the Ouest department; Cap-Haïtien, the second largest city in Haiti, located in the Nord department, and Saint-Marc in Artibonite department. Jérémie, the fourth city, located in the Grande-Anse department (Southern region) and Mirebalais in the Centre department (Central region) are among the least populated. Mirebalais has two additional characteristics: a) its geographic centrality in Haiti and b) its proximity to the Haiti-Dominican Republic border. Within the cities are defined segments of what the “Institut Haitien de Statistique et d’Informatique (IHSI, Atlas censitaire d’Haiti, 2003)” refer to as ‘Les sections d’énumérations (SDE)’ or primary sampling unit (PSU). The total of PSUs in the five metropolitan areas constitute the frame from which SDEs were selected to be surveyed.

The survey was conducted on a sample of 510 Haitian households (by the end of the study 511 questionnaires were completed) using a three-phase cluster sampling. In the first phase, a set of 17 SDEs, the primary sampling unit established according to Haiti’s geographic subdivisions as determined by IHSI, had been selected based on a probability proportional to size. In the second phase, two clusters of 17 households each had been randomly selected, totalling 34 households for each SDE, except for the two enumeration areas in Chambellan and Jérémie where 1 cluster of 17 households was selected in each SDE. **Figure 4** illustrates an example of second phase stratification (for a list of SDEs see Appendix II). In the third phase, an eligible interviewee (head of household or equivalent) was selected to respond to the questionnaire. A confidence level of 95% (typical value 1.96) with a margin of error of 3.36% is used in the calculation of the sample size.

FIG 4. Example of Three-phase Cluster Stratification



The questionnaire contained five core modules covering the following topics which constitute the analysis in this report (see [Appendix I](#) for more information):

- a. Demographics;
- b. Household livelihoods & remittances;
- c. Violence against women and girls;
- d. Primary education & home-schooling experiences;
- e. Community perceptions of COVID-19

The team conducted exploratory statistical analysis of key indicators in the above thematic areas across well-established dimensions of inequalities in Haiti such as the urban and rural divide and gender. It is well known, for example, that the overall poverty headcount ratio in Haiti is 58.5% (IMF, 2020). However, when examining this ratio across urban and rural contexts, it becomes clear that there is a wide gap between urban (40.6%) and rural (74.6%) poverty outcomes (ibid). This disaggregated approach unearthed important uneven outcomes in the study sample, as will be discussed in the relevant sections. Importantly, the descriptive analysis is complemented by qualitative analysis throughout based on focus group discussions and in-depth interviews with study participants, allowing for the triangulation and deepening of study findings.

3. STUDY FINDINGS

As the principal mechanism for virus transmission is through respiratory droplets among those in close quarters (WHO, 2020), we hypothesized that COVID-19 would spread more rapidly in crowded, urban slums, areas where social distancing is nearly impossible to practice, and in areas with poor sanitary conditions. These conditions combine with poverty and structural violence to render the urban population more vulnerable to infection. As the World Bank (2020e) acknowledges, “Poor households and those living in slums, camps or similarly vulnerable situations will be particularly exposed to the health crisis and its economic impacts” (p.10). For these reasons, we over-sampled for urban households in this study.

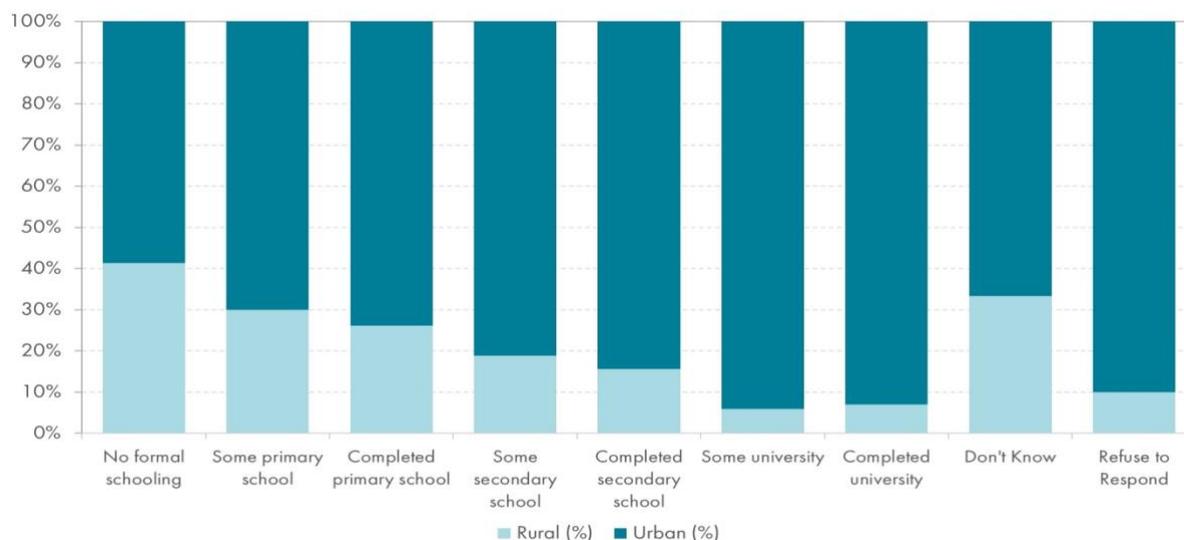
TAB 1. General Characteristics of Urban and Rural Households

	Rural	Urban	Total
Gender			
Female (Head of Household)	66 (18%)	295 (82%)	361 (71%)
Male (Head of Household)	35 (24%)	113 (76%)	148 (29%)
Total	101 (20%)	410 (80%)	511 (100%)
Household Size			
Mode of Household Size	4-6 (52%)	4-6 (56%)	4-6 (56%)

Table 1 shows basic household-level data on gender and household size by urban/rural dimensions of the **511** total respondents. Most of the sample is composed of families living in urban environments (**80% urban; 20% rural**). It is important to note that the urban/rural distribution in the sample does not reflect population distribution in Haiti. According to recent estimates by the World Bank, Haiti’s population is approximately **44.3% rural** (2020i).

Moreover, approximately **71%** of the interviewed households were headed by females. The distribution of female-headed households across urban and rural areas largely reflects the distribution in the overall sample. In terms of household size, most (**56%**) respondents reported between **4** and **6** members (not including the respondent), with no significant differences between urban and rural households. According to the Population Reference Bureau’s (2020) World Population Data Sheet, the average household size in Haiti is **4.3** persons.

FIG 5. Level of Education (Urban / Rural)



Educational attainment is higher overall in the urban contexts sampled (See **Figure 5**). This is to be expected as there are fewer educational facilities in rural areas, compelling those seeking advanced educational opportunities to migrate internally to cities and towns. In fact, the proportion of rural to urban responses decreases as the level of education increases, illustrating disparities in access to education across these dimensions in the study sample.

3.1 HOUSEHOLD LIVELIHOODS AND REMITTANCES

According to the World Bank (2020g), “The world economy is projected to contract by 5.2 percent in 2020... more than double that of the 2009 global recession,” placing between 71 and 100 million people into extreme poverty this year alone (p. 35). Latin America will be the hardest hit region in the world in terms of COVID-related economic recessions, experiencing growth downgrades of 7.2% in annual contraction of GDP per capita (World Bank, 2020d). Haiti’s GDP is projected to contract 4% in 2020, further weakening its economy and increasing unemployment, poverty, and food insecurity (IDB, 2020).

Low-Income Countries (LICs) such as Haiti “face reduced external demand, falling commodity prices, a dramatic decrease in tourism activity, weakening foreign direct investment, sharply higher borrowing costs, as well as an expected fall in remittances—a key source of foreign funding and support for household incomes” (World Bank, 2020g, p. 24). In the Caribbean, tourism-dependent countries may suffer job losses as high as 50% (Bartels-Bland, 2020). Further, the World Bank (2020f) cites how the global recession will likely take a disproportionate toll on countries with large informal sectors. These sectors are “often associated with underdevelopment, labour-intensive industry, less educated and poorly paid workers, limited access to financial and medical services, and poor or non-existent social security coverage. These features are likely to intensify the spread of COVID-19 among informal workers and worsen its adverse health and economic impacts” (World Bank, 2020g, p. 35). These are findings that have a direct impact on Haitian migrants, many of whom are in the Americas and engaged in the informal labour market. It is important to highlight that the situation in Haiti is particularly troubling in terms of the latter, as no more than 10% of employment is generated by the formal sector (ILO, 2018).

The International Labour Organization (ILO) estimates that in 2019, approximately 40% of all employment in the Americas was informal, with much higher proportions on average in the Latin American and Caribbean (LAC) region. The Inter-American Development Bank ([IDB], 2020b) estimates that 60% of the workforce in Mexico, the Central American isthmus, Haiti, and the Dominican Republic (referred to as the CID region) is working in the informal sector. In terms of urban versus rural

disparities, the ILO (2018) reports that those living in rural areas are almost twice as likely to be in a situation of informal employment than those in urban areas.

In the LAC region, prior to the pandemic, slightly over half (52%) of all women participated in the labour market (Bartels-Bland, 2020). A confluence of factors such as labour market shrinkage, school closures, increased domestic responsibilities will result in a reduction of work time or women leaving the labour market altogether (World Bank, 2020g). Therefore, women are more likely to be affected by COVID-19 related job losses than men (King et al., 2020). This makes sense as girls tend to lag behind boys in terms of educational attainment in low-income countries: “Less than two-thirds of girls complete their primary education and only one in three completes lower secondary schooling” (World Bank, 2020g, p. 7). Lack of formal education often compels women to work in the informal labour sector, which excludes them from “formal social protection measures such as unemployment insurance” (Bartels-Bland, 2020). In Haiti, a greater share of males ages 15 and older are in the labour force compared to females, accounting for more than 10 percentage points difference (World Bank, 2020a). Unpaid care work, the majority of which is performed by women, is estimated to be equivalent to almost 10% of global GDP risking the possibility that such “female-caregiver and male-breadwinner norms could intensify the inequitable division and perceived value of paid and unpaid labour during the pandemic and future recovery” (King et al., 2020, p. 80).

These gender disparities are apparent in the current study sample, as evidenced in **Table 2**. Much larger proportions of women responded to the categories “*I wasn’t doing anything*” (81%), “*I was engaged in petty commerce*,” (60%) and to a lesser extent, “*I was unemployed*” (91%) as compared to the overall distribution of males (71%) and females (29%) in the sample. Women head of households were the least represented in the “*I had my own business*” category (36%), but this response category does contain some overlap with the one regarding petty commerce, as the majority of entrepreneurs in the LAC region are engaged in the informal economy (Creative Associates International, 2020). The percentage of women engaged in petty commerce clearly illustrates women’s disproportionate level of vulnerability during the pandemic, as they are less likely to have access to social protections such as employment insurance or unemployment benefits.

TAB 2. Employment Status Before the Pandemic by Gender

	Female	Male	Total
I wasn't doing anything	26 (81%)	6 (19%)	32 (6%)
I was unemployed	16 (76%)	5 (24%)	21 (4%)
I was engaged in petty commerce	215 (91%)	20 (9%)	235 (46%)
I was working for a company or someone	72 (53%)	63 (47%)	135 (27%)
I had my own business	31 (36%)	54 (64%)	85 (17%)
Total	361 (71%)	148 (29%)	509 (100%)

TAB 3. Gender and Level of Education

	Female	Male	Total
No formal schooling	28 (97%)	1 (3%)	29 (6%)
Some primary school	54 (77%)	16 (23%)	70 (14%)
Completed primary school	35 (83%)	7 (17%)	42 (8%)
Some secondary school	139 (71%)	57 (29%)	196 (39%)
Completed secondary school	51 (62%)	31 (38%)	82 (16%)
Some university	20 (59%)	14 (41%)	34 (7%)
Completed university	27 (63%)	16 (37%)	43 (8%)
Total	361 (71%)	148 (29%)	509 (100%)

Women in the sample also tend to have lower levels of educational attainment (see **Table 3**). The frequency of female responses decreases as educational attainment levels increase. For instance, while the study was composed of **71%** females, **97%** of those who responded to the “*No formal schooling*” category were females. For educational attainment above the completion of secondary school, all row proportions are lower for females as compared with their male counterparts in the sample. It is important to note that the global Education for All initiative has made gains in providing access to primary education for girls (Chisamya et al., 2012), which has benefitted poor Haitian families since 2011 and has mainstreamed a key gender component (World Bank, 2014). These gains may be a factor in the current study sample, as row proportions of educational attainment are much higher for women until the primary school level but begin to decline after “*Some secondary school.*” The lower representation of women in the higher strata of educational attainment may provide insights into their limited participation in the formal labour market.

TAB 4. Financial Impact of COVID-19 by Urban / Rural

	Rural	Urban	Total
Negatively, I lost my job.	12 (16%)	64 (84%)	76 (15%)
Negatively, I have lost money.	70 (22%)	245 (78%)	315 (62%)
It has not affected my finances.	14 (14%)	86 (86%)	100 (20%)
Positively, I found a job.	0 (0%)	2 (100%)	2 (<1%)
Don't Know	5 (42%)	7 (58%)	12 (2%)
Other (please specify)	0 (0%)	3 (100%)	3 (<1%)
Refuse to Respond	0 (0%)	3 (100%)	3 (<1%)
Total	101 (20%)	410 (80%)	511 (100%)

According to **Table 4**, COVID-19 has negatively impacted households across urban and rural dimensions. In the overall sample, **77%** of respondents cited the negative impact of the pandemic on finances; only **20%** cited no impact. Less than 1% of all respondents mentioned a positive impact (all from the urban sub-group). Most households (**59%**) reported changing their livelihood activity due to the COVID-19 pandemic. According to the urban/rural tabulation in **Table 5**, a slightly larger proportion of rural households (**44%**) changed their livelihood activity than did urban households (**40%**). A “Yes” response indicates that there was a change in livelihood activity. This data may suggest that although residents of urban areas may be more directly affected by the health risks associated with COVID-19, those in rural contexts may be more vulnerable to the economic shocks that result from the pandemic. An alternative possibility would suggest that a change of livelihood activity may be a more challenging undertaking in urban rather than rural settings largely characterised by engagement in agricultural activities.

Although those living in urban areas are more likely to be exposed to public health risks related to COVID-19, those living in rural areas are likely to experience a disproportionate economic burden as a result of the pandemic. Furthermore, as those in rural contexts are more likely to participate in the informal economy, lack of government support coupled with disruptions in remittance transfers will likely push many households below the poverty level. Even worse, as Haitian migrants often experience a downgrade in terms of labour market integration in destination countries in the LAC region, many more engage in the informal economy as a strategy for survival (Costa de Sá, 2015). According to a World Bank report on the projected poverty impacts of COVID-19, a significant proportion of the new extreme poor will be concentrated in countries that already had high poverty rates and numbers of poor people (2020h). This suggests that Haiti will see a rise in the share of the population living in extreme poverty.

TAB 5. Change of Livelihood Activity (Urban / Rural)

	Rural	Urban	Total
No	40 (21%)	147 (79%)	187 (41%)
Yes	50 (19%)	217 (81%)	267 (59%)
Total	90 (20%)	364 (80%)	454 (100%)

Table 6 provides a breakdown of remittance amounts received by urban and rural families in Haiti (from family members or close friends living abroad between March 2020 and May 2020). Although the distribution of remittance amounts in urban and rural environments is similar to the overall distribution, a much smaller proportion of rural households (**11%**) are receiving remittances than urban households (**89%**). Moreover, it is clear when examining the percentage values that remittance amounts may be larger on average in urban environments than in rural ones. Similarly, **Table 6** shows that a slightly larger proportion of rural families (**91%**; column total) experienced remittance disruptions during the COVID-19 pandemic than did urban families (**79%**; column total), reinforcing the earlier data that suggests that the pandemic has had a greater adverse economic impact on rural households. Overall, the largest proportion of households in both categories (urban and rural) reported receiving between **50 and 99 USD** during the entire period. Significant proportions, approximately **one-third**, of households also reported receiving between **100 and 300 USD** across both rural and urban contexts. The average amount remitted between March 2020 and May 2020, according to Haiti's central bank, Banque de la République d'Haïti (BRH), was **158 USD** (see **Figure 8**). Although the measurement scales are different for the study sample data and the BRH data, the former being ordinal and the latter being continuous, the triangulation of these data strengthen these findings, as the amounts reported in the study are similar to the ones captured by BRH transfer data. More in-depth analysis of remittance transfer data shared by the BRH is provided in the subsequent section.

TAB 6. Remittance Amounts by Urban / Rural

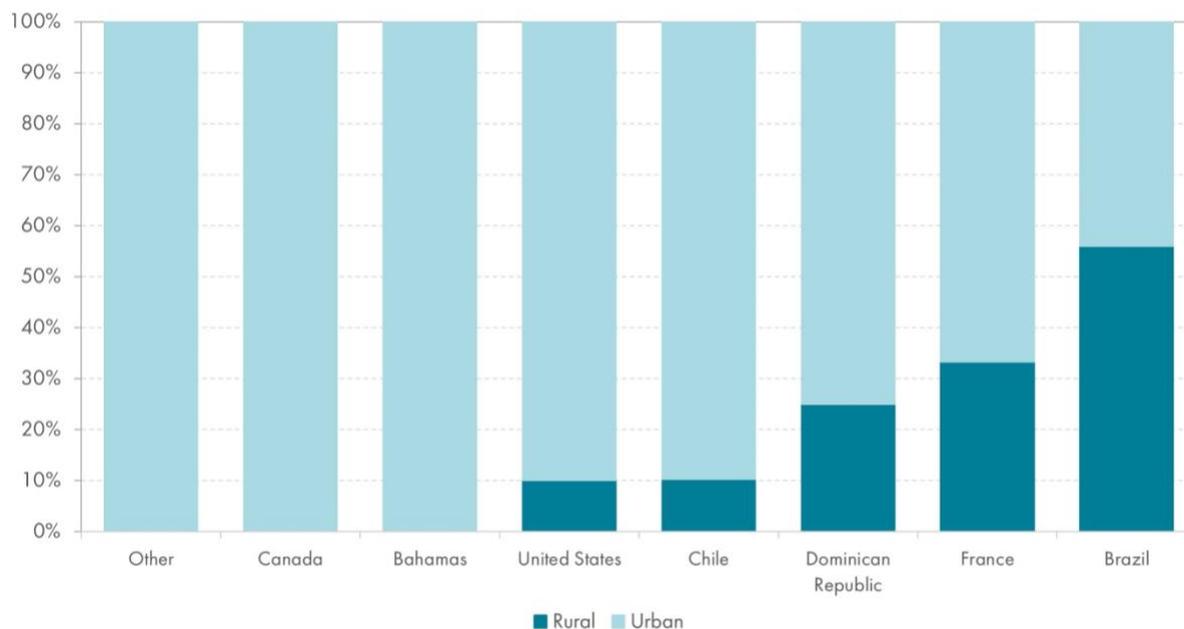
	Rural	Urban	Total
Less than USD \$50	2 (17%)	10 (83%)	12 (11%)
Between USD \$50 and \$99	5 (13%)	34 (87%)	39 (36%)
Between USD \$100 and \$300	4 (11%)	32 (89%)	36 (33%)
More than USD \$300	1 (7%)	13 (93%)	14 (13%)
Don't Know	0 (0%)	2 (100%)	2 (2%)
Refuse to Respond	0 (0%)	6 (100%)	6 (5%)
Total	12 (11%)	97 (89%)	109 (100%)

Rural households are likely to experience greater barriers in accessing financial institutions to withdraw remittances during the pandemic (Orozco, 2020, p. 2). These barriers may have been felt in the study data, as **19** out of **21** rural head of households reported experiencing disruptions to remittance transfers during the coronavirus pandemic (see **Table 7**).

In **Figure 6**, the breakdown of sources of remittances by country is provided. The distribution across countries based on urban/rural location is consistent with the overall distribution, except for Brazil and France. It is interesting to note that Brazil accounts for almost **44%** of the rural column total. This is the only country of destination with more rural respondents than urban ones, indicating a potential rural migrant cluster. When examining the precise locality, there is indeed a significant cluster of **11** respondents in rural Petit-Goâve that make up most of the rural total. The remaining **three** respondents were interviewed in the Belladère locality. Based on interviews conducted in rural Petit-Goâve,

international migration is a recent phenomenon in the area that began after the 2010 earthquake. Brazil is the primary migration destination for residents of the area. Several community members migrated to Brazil and their family members subsequently followed. The clustering of rural respondents in Petit-Goâve indicates the influence of social networks as a main decision-making factor on destination country choice.

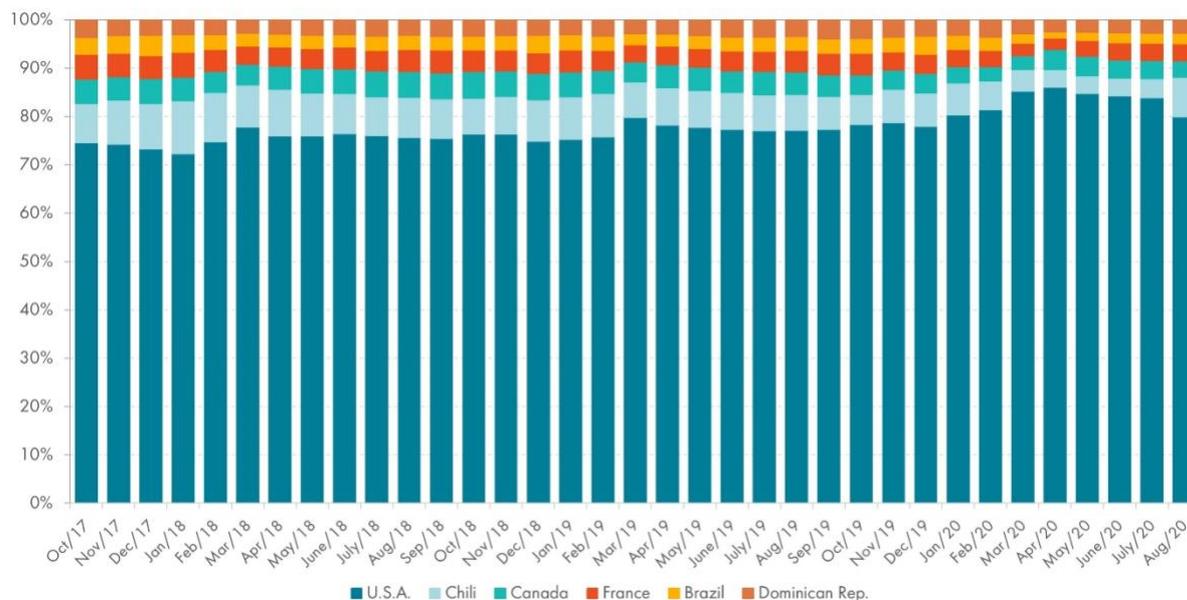
FIG 6. Sources of Remittances by Country



According to the 2001 national census, **60%** of relatives abroad were living in the United States and **20%** were in the Dominican Republic (Orozco, 2020, p. 21). In a survey of 500 individuals conducted in 2006, Orozco focuses on these two countries as main sources of remittances (ibid). It is clear from the current study sample the extent to which destinations in Latin America, particularly Brazil and Chile, have become significant elements of the Haitian transnational domain (although results for Brazil may be overrepresented due to the cluster in Petit-Goâve). In the subsequent analysis of official remittance data up to August 2020, an updated remittance landscape is provided.

According to primary analysis of remittance data by INURED, the majority of remittances to Haiti still originate in the United States through the present day but new and important remittance sending countries have indeed surfaced in the Global South, such as Brazil and Chile (see **Figure 10**). Although the Dominican Republic exhibited an average of **3%** of remittance transfer amounts to Haiti between January 2020 and August 2020, it is essential to note that a large proportion of remittances from the Dominican Republic are sent informally and/or brought in cash across the porous and busy terrestrial border (despite being officially closed since March 2020). This suggests that a significant proportion of remittance transfers from the Dominican Republic are not reflected in the BRH reports. Furthermore, although the Dominican Republic remains a key destination country for Haitian migrants, many have continued their migration towards new destinations in the Global South fleeing an environment of increased precarity in the neighbouring country (INURED, 2017b).

FIG 7. Proportion of Total Remittance Transfers to Haiti (%) by Top Six Source Countries from October 2017 to August 2020



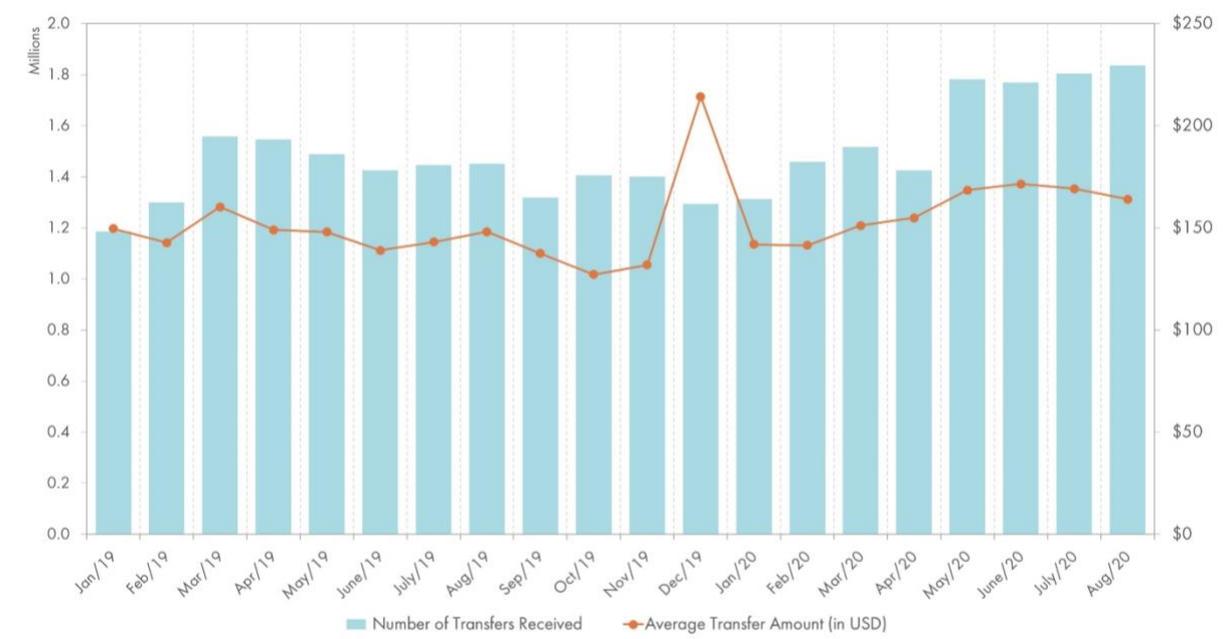
Increasing anti-migrant and xenophobic sentiment in the wake of the global pandemic has recently become the subject of national media attention in Brazil, exacerbating anti-immigrant sentiments that emerged as the Brazilian economy began to retract following the 2014 World Cup and 2016 Olympic games hosted in the country (see INURED, 2020). Newspapers such as *Brasil de Fato* and *Metrópoles* published articles in October 2020 that shed light on this phenomena as well as a complete lack of transparency on the impact of COVID-19 on migrant populations due to the “military occupation of the (Brazilian) Ministry of Health” (Brasil de Fato, 2020; *Metrópoles*, 2020). These—and other—national media outlets cite Brazilian Federal Police data that show significant increases in deportations in 2020 as compared to 2019, of mostly Bolivian nationals (Globo, 2020). Chile – also a notable destination in the study sample – recently ruled that foreigners leaving the country on humanitarian flights were obligated to sign an affidavit agreeing to remain outside of the country and renounce the right to apply for residency or asylum for nine years (Freire, 2020). Although this ruling never came into practice, it exemplifies the rise in nationalist and anti-immigrant sentiment in some countries in the region. This will translate into a worsening of socioeconomic and health outcomes for Haitian migrant populations, many of whom send vital remittances home that sustain family units. These vulnerabilities are compounded by factors such as the irregular status of many migrants or migrant engagement in the informal labour market. At the outset of the pandemic, there were rising concerns about the economic impacts on migrant employment and livelihoods, and by extension on their ability to remit to the families they had left behind in the origin country.

The World Bank’s (2020b) first 2020 Migration and Development Brief (#32) focuses on the impact of COVID-19 on migration and projected a sharp decline of approximately 20 percent in global remittances in 2020. More recent data from a variety of sources, however, have shown that this, by and large, has not happened. Following an initial dip in remittances between March 2020 and April 2020, remittance transfers to the LAC region have actually increased for many countries since 2019, including the Dominican Republic, Mexico, El Salvador, Guatemala, and Colombia. The most recent data from August 2020 shows that remittance transfers to the Dominican Republic, for example, were approximately 22% higher than in 2019 (BBVA, 2020). In Haiti, remittance transfers were reported to have also increased by approximately 5% between January 2020 and July 2020 (Creative Associates International, 2020).

In October 2020, the World Bank published another Migration and Development Brief (#33) with the same focus, but this time painting a very different picture (World Bank, 2020c). While in the 32nd brief a steep decrease in remittances in the LAC region of 19.3% was forecasted, the most recent brief has adjusted this decrease to 0.2% from 2019 (ibid). The regression model used by the World Bank to forecast remittances assumes that remittance flows are positively linked to migrants' incomes in the destination country and to prices and income levels in the country of origin (ibid). Although these may be significant factors in determining remittance amounts, the model fails to account for both measurable (currency fluctuations; remittances to Mexico increased significantly during the pandemic due to a fall in the value of the Mexican peso) and non-measurable (the strength of migrant solidarity networks) covariates that influence the transfer of remittances between migrants and their countries of origin. In a more recent report, Jewers and Orozco (2020) predicted that remittances from the United States to the LAC region would decrease by 16% in 2020 as compared to 2019 due to an uneven landscape for migrant workers in terms of access to income support and healthcare, among other issues. Many researchers have highlighted the unequal impacts of the COVID-19 pandemic on migrant worker populations, particularly women (Foley & Piper, 2020).

According to INURED's own analysis of BRH official remittance data from January 2019 to August 2020, transfers to Haiti actually increased by **18%** from January 2020 to August 2020, as compared to the same period last year. In terms of total transfers and average transfer amounts, a general upward trend is apparent in 2020 thus far, with expected seasonal fluctuations (see **Figure 8**). Average transfer amounts reached an extreme high in December 2019 and although the number of remittance transfers received seem low for this month, the high average resulted in more than 270 million USD in transfers - the highest monthly total ever so far (not including 2020 data). The average monthly amount is also an all-time-high, although the data depicted in **Figure 8** is only available since October 2018. This could indicate that although the impacts of *peyi lòk* may have affected the population's ability to physically withdraw remittances, family members abroad may have sent fewer but much higher value transfers as a mitigation strategy. Delineating the exact impact of *peyi lok* presents difficulties, as the month of December tends to yield above-average volumes due to the anticipation of increased spending during the holidays. However, the year-on-year increase of **3.1%** supports the assertion that remittances may have been used to attenuate the impact of the political crisis and accompanying lockdowns in late 2019.

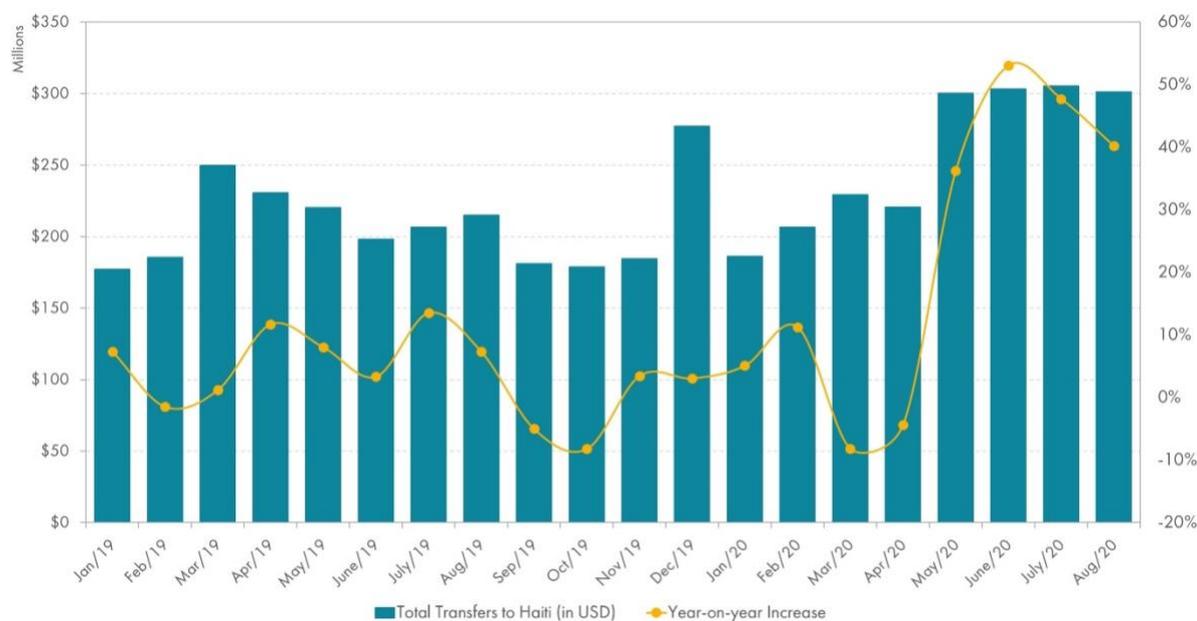
FIG 8. Total Number of Transfers and Average Transfer Amount (in USD) by Month from January 2019 to August 2020



Contrary to the World Bank’s initial projections, Haiti experienced a slight dip in total remittance transfers in March 2020 and April 2020 only but recovered with force in all four of the succeeding months. This is also evident in **Figure 9**, where it is clear that remittance transfers’ year-on-year increase peaked in June 2020, experiencing a notable increase of **53%** as compared to June 2019. It is still uncertain whether this growth in remittance transfers will be sustained until the end of 2020. Previous studies have shown the importance of remittances in times of crisis, where they tend to provide vital support to household income, as migrants are typically unlikely to be directly affected by crises in their home countries (Overseas Development Institute, 2007). Cela et al. (2017) have provided evidence of this in the context of Haiti, following the 2010 earthquake, however it is recognized that this may not hold true during a global pandemic that may simultaneously affect migrants in the host country and the families they have left behind in the origin country.

Remittance transfers from the United States reached an **all-time high** in April 2020. Cementing its status as the largest remitting country in terms of transfer volume to Haiti, the United States was by far the main source of remittance transfers in April 2020 amounting to **83%** of all recorded transfers for that month (see **Figure 7**). This increase indicates the powerful support and solidarity exhibited by Haitian migrants toward their families and communities in Haiti, particularly during times of crisis, despite projections of severe negative impacts of the pandemic on the employment status, health, and livelihoods of migrants in the United States (Orozco, 2020). In the four months following April 2020, however, the proportion of remittance transfers from the United States decreased almost **10%** to **74%** (see **Figure 7**). Canada also experienced a remarkable increase in transfers to Haiti during the COVID-19 period, more than doubling from February 2020 to May 2020 and generally sustaining these volumes through August 2020. Thus, important remittance-sending countries in the Global North have actually sustained or increased transfers during the COVID-19 pandemic.

Fig 9. Total Remittance Transfers (in USD) and Year-on-Year Transfer Increases (%) to Haiti from January 2019 to August 2020



In early October 2020, Haiti’s national currency, the Haitian gourde, experienced a sudden rise in value of more than 60% as compared to the US dollar, greatly impacting Haiti’s remittance economy as the greatest share of remittances originate in the US and most households previously received those funds in US dollars (Charles, 2020). In response to the sudden devaluation of the US dollar the price of goods

and services have increased while most transfer houses have resorted to paying out transfers in Haitian gourdes in lieu of US dollars. This has, in turn, reduced the transfer amounts received by Haitian households as well as their purchasing power on the Haitian market (ibid).

FIG 10. Total Remittance Transfers (in USD) and Year-on-Year Transfer Increases (%) from Chile & Brazil to Haiti from January to August 2020, including the COVID-19 Period

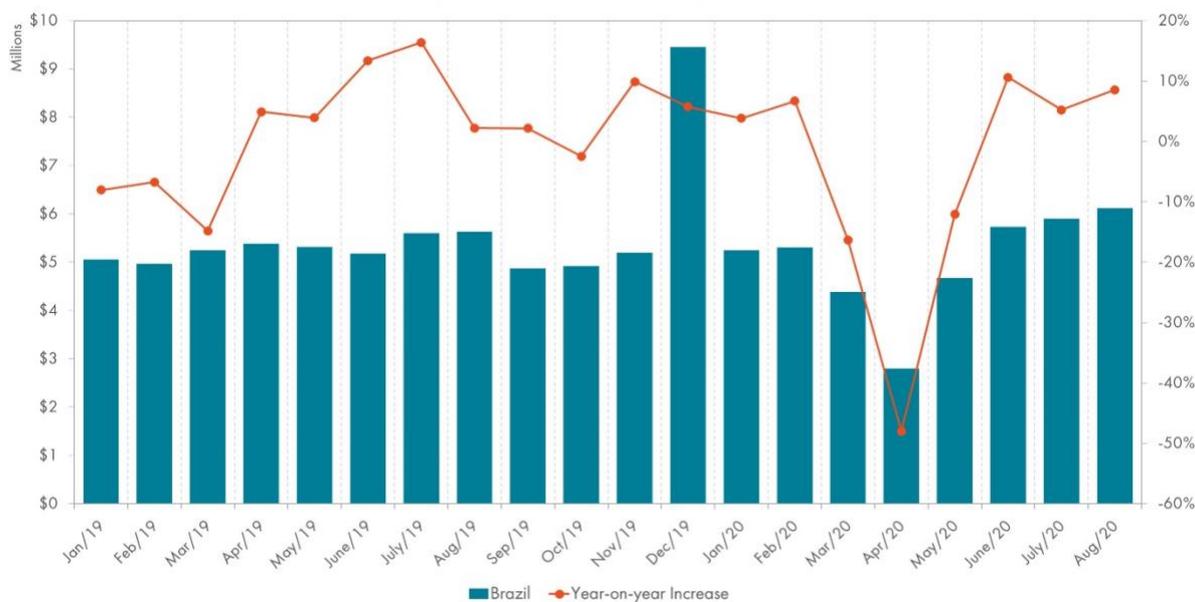


The situation of remittances from the LAC region during the pandemic, however, paints a slightly different picture. As is clear in **Figure 10**, remittance volumes from Brazil and Chile remained steady in terms of year-on-year comparisons, except between March and May 2020. A significant decrease of **more than six million USD** was observed in April 2020, where transfers were down **almost 50%** as compared to April 2019. By June, transfer volumes rebounded and a significant increase in transfers from Chile culminated in an all-time-high in August 2020, amounting to **8%** of total transfers to Haiti. Although many researchers such as Jewers and Orozco (2020) had projected decreased remittance flows from the United States to the LAC region, this has not been the case for Haiti. However, remittance flows from the LAC region to Haiti were negatively affected by the pandemic, as is reflected in the reduction of transfers recorded by Haiti’s Central Bank.

Brazil experienced significant remittance disruptions between March 2020 and April 2020, reaching a new low in terms of year-on-year transfers in April 2020 (**-48%** as compared to April 2019). The remittance landscape in Brazil, however, has been more stable than that of Chile in 2020, as between January 2020 and August 2020 Chile experienced only one month of year-on-year increase, in August 2020. All other months exhibit double-digit decreases in Chile as compared to 2019, culminating at **-53%** in April 2020. The volume of transfers is lower on average from Brazil, whose Haitian migrant population sends back approximately **8.9 million USD** less per month than Chile, according to the available time series data. Thus, remittances from Brazil have been steadier than those from Chile although volumes to Haiti from Chile are much higher on average than transfers from Brazil. Chilean remittances seem to have rebounded, although two months later than Brazilian transfers (in August 2020; by a **59.2%** year-on-year change). It remains less clear for Chile, however, whether this increase will be sustained whereas for Brazil, the resilient and slight upward trend seems to have recovered after May 2020, with three consecutive months of year-on-year increases between June 2020 and August 2020. It is important to note that, while Brazil has exhibited a modest upward trend since January 2019,

Chile has shown a downward trend, with consistent year-on-year decreases. Recent phenomena such as onward migration and returns as well as rising xenophobia in Chile may have contributed to this downward trend over the last two years (INURED, 2020).

FIG 11. Total Remittance Transfers (in USD) and Year-on-Year Transfer Increases (%) from Brazil to Haiti from January 2019 to August 2020, including the COVID-19 Period

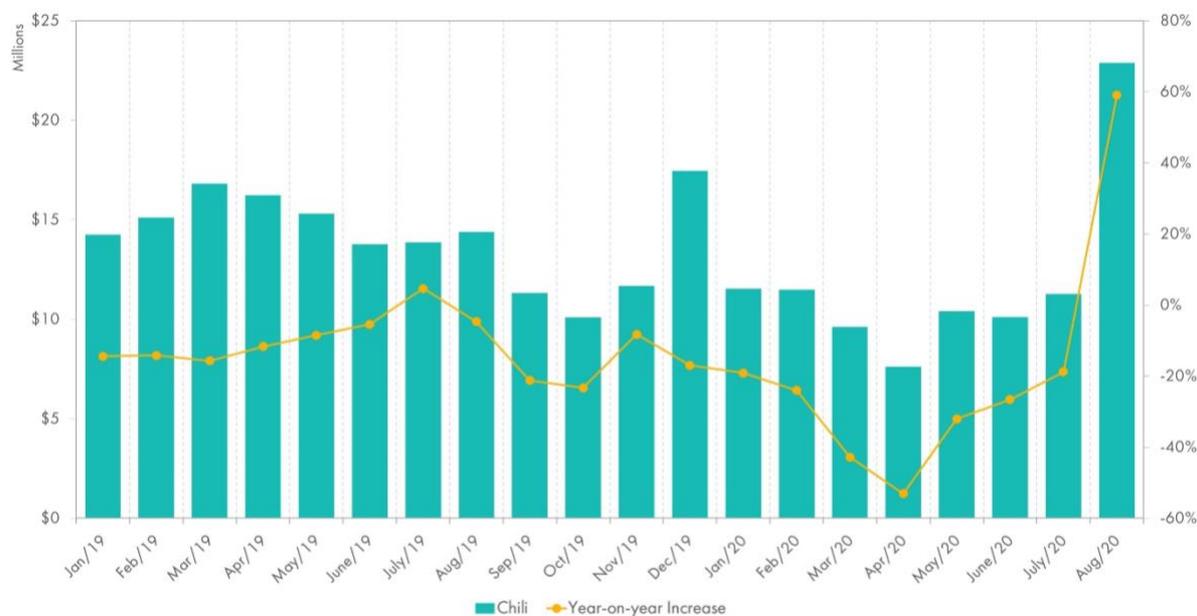


As previously mentioned, the informal nature of a significant proportion of remittance flows to Haiti, among other factors, make this phenomenon difficult to quantify with exactitude. Moreover, the high cost of sending remittances in some contexts increases participation in the informal money transfer economy. This is especially the case for remittances from the Dominican Republic to Haiti, where the cost of sending money before the pandemic was around **8%**, increasing to more than **10%** during the pandemic (World Bank, 2020c). Additionally, the remittance landscape in Haiti is currently undergoing dramatic changes, with the central bank instituting a policy in October 2020, which was initially delayed after protests, requiring that transfer houses pay in Haitian gourdes and not US dollars, irrespective of the currency used in the origin country (Charles, 2020). This has caused large-scale disruptions in transfer services, with many transfer establishments protesting the new regulation while imposing their own predatory exchange rates that disadvantage remittance-receiving households in Haiti.

With reference to the general study sample, **81%** of households reported disruptions in remittance transfers from family members or friends between March 2020 and May 2020 (see **Table 7**; “Yes” indicates disruptions to remittances). Although this is a very significant proportion, it is unclear whether these disruptions were the result of access issues (e.g., not being able to withdraw remittances due to business closures) or dips in remittance volumes. It is apparent, when examining the BRH data, that there were decreases in year-on-year transfers in March 2020 (**-8.2%** lower than March 2019) and April 2020 (**-4.3%**) and a significant dip in April 2020 in the number of transfers received, but the extent of the general recovery in May 2020 was substantial, when total transfer volumes to Haiti experienced a year-on-year increase of **36.2%**. Therefore, conclusions in remittance disruptions from the study data should be checked against the succeeding analysis of official BRH data, which may provide more generalizable data on the larger-scale impacts of remittance disruptions in Haiti during the pandemic. What remains unclear is the extent to which the increased – and so far, sustained – transfer volumes are the result of mobility restrictions that may have impacted the transfer of informal remittances (such

as those from the Dominican Republic). International and internal migrants may have resorted to formal remittance channels in a situation where informal channels have dried up or at least, contracted (McAuliffe, 2020). Further analysis of official remittance of remittance data into 2021 will be necessary to quantify with more precision the longer-term impacts of COVID-19 on the remittance economy in Haiti.

FIG 12. Total Remittance Transfers (in USD) and Year-on-Year Transfer Increases (%) from Chile to Haiti from January 2019 to August 2020, including the COVID-19 Period



Despite preliminary analysis on the part of international organizations such as the World Bank and the IMF indicating a reduction in remittance transfers to LICs, the country-specific data for Haiti demonstrates otherwise. In the wake of extreme political and economic hardship in the country, remittances have once again proved to be a vital source for survival and illustrate one manner by which households mobilise transnational migratory networks as a method to mitigate the impacts of emergencies. The unbalanced impacts on migrants in—and on remittances from—the LAC region, however, have proved true, as remittances from the Global North—mainly the United States—have been a powerful mitigating force during the COVID-19 pandemic, while transfers from key countries of destination in the Global South such as Brazil and particularly Chile have experienced significant decreases in terms of year-on-year differences.

TAB 7. Remittance Disruptions by Urban / Rural

	Rural	Urban	Total
No	2 (7%)	27 (93%)	29 (19%)
Yes	19 (15%)	106 (85%)	125 (81%)
Don't Know	0 (0%)	1 (100%)	1 (<1%)
Total	21 (14%)	134 (86%)	155 (100%)

3.2 VIOLENCE AGAINST WOMEN AND GIRLS

Globally, 1 in 3 women (aged 15 to 49) have experienced some form of gender-based violence (GBV), mostly at the hands of an intimate partner (UN Women, 2020a; Tøraasen, 2019). GBV has been cited as a “severe problem” in the LAC region that results in both immediate and long-term negative health impacts on survivors, their dependents, and society (World Bank, 2020a). Women are among the most vulnerable groups in Haiti, as they are socially, economically, and politically marginalised by Haitian institutions and within the family (INURED, 2017b). The consequences have been severe as Haiti has the highest fertility and maternal mortality rates in the LAC region (INURED, 2017b; Maternowska, 2006). In fact, maternal mortality rates worsened between 2000 and 2017. In Haiti, violence is a common occurrence, and women and girls are particularly vulnerable to all its forms. A 2012 retrospective national survey of violence against children in Haiti found that **67%** of the 2916 participants had experienced childhood physical violence (Flynn-O’Brien et al., 2016). However, the same study found that a greater portion of girls experienced physical, sexual and emotional violence when compared with their male counterparts (Reza et al., 2014). The study also found that a greater share of girls had experiences as child *restaveks*² than boys and were more likely as *restaveks* to report suffering physical and sexual abuse than children who had not been in domestic servitude (Gilbert et al., 2017). Once a girl is violated, her chances of being violated again increases, even into adulthood. During a global pandemic, it is not expected that GBV will abate. In fact, these incidences are known to increase in times of crisis.

It has been widely noted that GBV, particularly domestic violence, has increased globally during the pandemic due to government-imposed lockdowns and increased time spent at home (UN Women, 2020c; Hall and Tucker, 2020). Some of the reasons cited for these spikes in GBV include, “the combination of increased tension, stress and confinement conditions in the household” (World Bank, 2020e, p. 12). The World Bank policy note (2020d) suggests that COVID-19 related school disruptions will have disproportionate impacts on girls who may be burdened with additional care-related responsibilities at home. Though not indicated in the policy note, young girls may also face increased exposure to violence while at home under such stressful and economically precarious conditions. Aguero (2020) has systematically shown how calls to a domestic violence helpline in Peru have increased during the COVID-19 lockdown – a country where an estimated **58%** of women have been victims of GBV.

The confluence of pre-existing gender inequities and a fledgling economy in Haiti has led to a situation of extreme vulnerability for women. When examining UN Women’s ten key policy indicators for a gendered response to the COVID-19 crisis, it becomes apparent the extent to which these vulnerabilities may accumulate. Indicator #2, for example, states that “women in the informal economy are especially vulnerable” due to their general lack of access to decent work and the associated benefits (UN Women, 2020a).

In the study sample, **forty-two percent (42%)** of all respondents reported that gender-based violence had increased during the pandemic while just under one-quarter (**24%**) reported that such incidences of violence had remained constant. In one particular interview, a recent victim of sexual violence expressed her rage regarding women’s vulnerability in Haitian society:

“Me, personally, I was a victim of rape during the pandemic. But I make no distinction because it is not due to the virus, because it happens often here. Women don’t talk about it! It could have happened to me before. The worse is that I see my rapist and he’s arrogant. I’m the one who has to lower my eyes each time!”

² Restaveks are a particular form of child domestic servitude in which children, often from rural areas of Haiti, are sent to live with families in urban areas where they perform household chores and child-rearing activities in exchange for lodging, food, and, if fortunate, formal schooling. Many fall victim to all forms of abuse (See M. Marcelin, 2017 for more information).

The woman argues that the pandemic did not create conditions for her to be violated but that she, as well as all Haitian women, can fall victim to sexual violence at any time. While this quote is not representative of the sample, it articulates the extreme vulnerability of women in Haitian society. Not only does she feel she has no legal recourse, but she must now bow her head in shame while her assailant roams freely. Further, she reports receiving no empathy from other women whom, she believes, fail to provide her with any emotional support:

“They don’t know what it’s like to be violated. They minimise it.”

Some female survey participants expressed discomfort discussing the theme of violence, which may explain their reluctance to acknowledge it. One respondent became distant during this portion of the questionnaire remarking:

“But you told me we were going to talk about education and the coronavirus...I don’t know much about [violence]...I don’t listen to the news these days.”

This could also explain the fact that female participants in the sample accounted for **13** of the **15 (86%)** responses denying that women had been victims of violence at all during the pandemic (response category: *“Women and girls have not experienced violence during the pandemic”*) in **Table 8**. If a male partner were in the vicinity at the time of interview women may be less candid when discussing incidents of GBV. In addition, this could be related to shame or women’s conceptualization of GBV as an act carried out by someone other than an intimate partner, such as a stranger. There is no notable difference regarding perceptions of GBV across gender or urban and rural areas.

TAB 8. Perceptions of Gender-Based Violence by Gender

	Female	Male	Total
Women and girls have not experienced violence during the pandemic	13 (86%)	2 (14%)	15 (3%)
Women and girls have experienced the same level of violence as before	77 (64%)	44 (36%)	121 (24%)
Women and girls have experienced more violence than before the pandemic	150 (69%)	66 (31%)	216 (43%)
Don't know	119 (77%)	35 (23%)	154 (30%)
Refuse to Respond	1 (100%)	0 (0%)	1 (<1%)
Total	360 (71%)	147 (29%)	507 (100%)

In terms of perceptions of GBV, **42%** of women (**44%** of men) reported an escalation of violence during the pandemic and **33%** of women (**23%** of men) reported not knowing. As previously mentioned, due to the sensitive nature of GBV and related issues, the reluctance of some women to respond to these questions may explain the higher proportion of female *“Don’t know”* responses.

Of those respondents who reported an escalation of violence during the pandemic, the vast majority (**69%**) cited economic pressure due to having little or no money (See **Table 9**). This reality holds up across urban and rural communities. It is important to note that women in poverty or without income \ face greater risks in terms of exposure to and impact of COVID-19 on their lives and livelihoods (UN Women, 2020a). In this light, Merrill Singer’s concept of syndemics gains theoretical traction in framing further research, as Gravlee (2020) has shown that COVID-19 is known to have uneven impacts across socioeconomic and gender lines. Gravlee and Hall (2020) have begun operationalizing this conceptual framework in their COVID-19 research accounting for the multidimensional impacts of the virus on

vulnerable populations, while underlining the synergistic impacts of the virus with other epidemics such as GBV.

Followed by responses attributing increases in GBV to economic pressure was frustration with the government, which ranked higher among urban respondents (2nd) than among rural participants (3rd). In the rural context, the social stress related to getting infected was ranked second and considered to have contributing to the increase in GBV. The higher ranking of frustration with the government among urban participants may be explained by the relative absence and lack of government capillary reach in rural areas contrasted with its physical presence (e.g., agencies, offices, etc.) and accessibility in urban settings. Notably, many cities have been beset by, often violence, street protests, associated with *peyi lòk* and the PetroCaribe scandal. However, one urban participant's response may have been influenced by a recent change to the penal code announced by President Moïse in July 2020. The amendment reduces the age of sexual consent from 18 to 15 years of age, resulting in the participant's declaration that:

“The government just legalised all sexual acts with a 15-year-old minor. Predators won't hesitate anymore!”

From the respondent's standpoint, the government has given carte blanche to sexual deviants. From the data generated on perceptions in the current study, it becomes clear that there is a perception that incidents of GBV have, indeed, risen in Haiti during the COVID-19 pandemic, as it has in most other parts of the world. It is important to note that the grave economic impacts that the pandemic has and will have on Haiti and the Haitian diaspora are likely to amplify the vulnerability of women and girls, leading to a rise in GBV. Although some key actors, such as the World Bank and UN Women, have attempted to bring research and information on gender considerations to the forefront of the global battle against COVID-19, a coherent view of the experiences of women and girls during this pandemic is yet to be achieved. In their recent Rapid Gender Analysis conducted in Haiti from May 2020 to September 2020, CARE and UN Women (2020) provided preliminary estimates suggesting that GBV had risen between **5%** and **40%**. The wide range for the estimate is indicative of the lack of reliable data on GBV during the pandemic.

More recently, a startling report in the local news revealed an ongoing investigation of more than 40 girls between the ages of 14 and 17 that have become pregnant during the coronavirus pandemic in Beaumont, a village containing some 12,000 inhabitants in the department of Grande-Anse (Dorsainville, 2020; Haiti Libre, 2020). All of the girls attended the same school, l'École de la Prophétie, some have been forced to discontinue their studies, and 4 reported that the pregnancy was a result of sexual assault (Dorsainville, 2020). The Departmental Initiative against the Mistreatment and Trafficking of Children (l'Initiative Départementale contre la Traite et le Trafic des Enfants, or IDETTE) and the Institute for Social Well-Being and Research (Institut du Bien-Être Social et de Recherches, or IBESR) have highlighted the prevalence of sexual abuse on the part of educators and other school administrators, who have reportedly taken advantage of the vulnerabilities of adolescent girls and young women (Haiti Libre, 2020). However, they are not the sole culprits of such abuses as an ongoing investigation has revealed that the fathers of these victims range in age from 18 to 57 years old (Dorsainville, 2020). Further, there are reports of a much larger scandal in the department of Grand-Anse. Seventy-four (74) adolescent and teenage girls have become pregnant in eight schools in the commune of Beaumont, twenty-four (24) girls have reportedly suffered the same fate at the Lycée National of Corail, a neighbouring commune of Beaumont, and more parents are coming forward to report that their child has been impregnated under unusual, and possibly exploitative, circumstances (ibid).

A testament to the pervasive nature of this phenomena, one of the aggressors is alleged to be the son of the Justice of the Peace charged with investigating the matter. Of note is the fact that one of his alleged victims—as it is alleged that there has been more than one—is the daughter of the principal of

l'École de la Prophétie which is the school at the centre of the Beaumont scandal. The assailant is alleged to have used a firearm to restrain his victims during the sexual assault (ibid). It is reported that in Haiti victims often fail to come forward due to the costs associated with filing a court complaint. Reports of the Beaumont scandal suggest that public transportation to and from Beaumont to Jérémie, the nearest courts, is approximately 3,000 Haitian gourdes (USD \$50) per trip and that filing court charges requires multiple trips that are too costly for poor, rural families. Hence the common practice of negotiating compensation for victims between the victim and assailant's families before a local notary. Victims' families find this alternative to be the only viable, and least costly, form of recourse. Families of the victim may be compensated between 30,000 and 40,000 Haitian gourdes (USD \$500 and USD \$667) in lieu of the costly pursuit of legal justice which often eludes victims of sexual assault or abuse in Haiti (ibid).

Although anecdotal, this report demonstrates that GBV is a serious problem in Haiti. Other studies have revealed GBV to be an issue faced by Haitian girls and women attending educational institutions (Cela, 2017; INURED, 2010), and one that predates the pandemic. The impacts of the pandemic seem to have exacerbated these tendencies in the rural communities of Beaumont and Corail, and possibly elsewhere in Haiti, as predators may capitalise on the multiplicity of vulnerabilities girls and young women face during school closures for their own sexual gain. What this scandal reveals, along with study results, is that the vulnerability of women and girls in Haiti has increased during the pandemic.

TAB 9. Urban and Rural Perceptions of Gender-Based Violence by Gender

	Rural	Urban	Total
There is a lot of economic pressure because there is little/no money	21 (13%)	135 (87%)	156 (70%)
There is a lot of frustration with the government	6 (29%)	15 (71%)	21 (9%)
There is a lot of social stress about getting infected with the coronavirus	9 (39%)	14 (61%)	23 (10%)
Other (please specify)	6 (40%)	9 (60%)	15 (7%)
Don't know	2 (18%)	9 (82%)	11 (5%)
Total	44 (19%)	182 (81%)	226 (100)

Indeed, the preceding considerations show that during COVID-19 there is a perception by the majority of respondents that violence against women and girls has increased, and news reports appear to corroborate their perceptions. As reported above, RNDDH (2020) reports suggest that the insecurity that has ravaged Haiti during the pandemic, the various cases of kidnappings, rapes, and assassinations, have not spared women. On the contrary, women are the most vulnerable because when they are kidnapped, they are quite often raped, tortured, and/or murdered. The case of Evelyne Sincère, a secondary school student who was kidnapped, sexually assaulted, then murdered in November 2020 bears witness to this (Lemaire & Vilme, 2020).

3.3 PRIMARY EDUCATION & HOME-SCHOOLING EXPERIENCES

In this study, almost all households (**99%**) with elementary school aged children reported that they had experienced educational disruptions during the COVID-19 pandemic. According to UNICEF Haiti, schools were closed for a period of four months, affecting approximately four million students (UNICEF, 2020). **Table 10** shows the tabulation of **Question 5.2** (*Are there any children in the household who are not attending school due to the coronavirus?*) across urban and rural dimensions. It is interesting to note that only **two** households (**less than 1%**) reported all children attending school, both in the rural context.

TAB 10. COVID-19 and Disruptions to Schooling by Urban / Rural

	Rural	Urban	Total
No	2 (100%)	0 (0%)	2 (<1%)
Yes	99 (19%)	410 (81%)	509 (>99%)
Total	101 (20%)	410 (80%)	511 (100%)

Regarding prior school closures, most households reported that these closures were due to *peyi lòk*. Schools resumed activities just a few weeks before the pandemic was officially declared in March 2020 in Haiti when the first cases of COVID-19 were reported. When accounting for *peyi lòk* and COVID-19 school closures, Haitian students experienced educational disruptions of up to 8 months between September 2019 and August 2020 depending on the school and the family's circumstances. Significantly, however, an overwhelming number of rural households (**89.2%**) reported that schools were not closed during *peyi lòk* (**See Table 11**). During a focus group discussion, parents corroborated this: *"The children in the provinces, I could say they were lucky, they had experienced a good part of their program because there were many provinces where schools functioned from September [2019] to March [2020]."* This indicates that *peyi lòk* was largely an urban phenomenon, with differential impacts across urban and rural areas.

During interviews and focus group discussions, several teachers expressed concern about the psychological impact of *peyi lòk* on students in urban centres:

"Learning can't occur in an environment that isn't sane. Psychologically speaking the child doesn't feel safe." (Focus group participant, September 2020).

"For students in the city centre, they were directly impacted because they couldn't go to school. Not only could they not go to school, but they couldn't assure themselves when they would return to school" (Interview, August 2020).

"Even if the child is able to go to school, based on what they are hearing, based on what people are saying, and even what they don't hear but are imagining, all of this can put them in a situation where they can't focus, they can't concentrate on what is being done." (Focus group participant, September 2020).

"The children see everything that's happening...they are living it. When they return to school that's mostly what they talk about. They're afraid, it's what they are experiencing in their area, in their neighbourhoods. It's what they talk about." (Focus group participant, September 2020).

Clearly, these educators were concerned with the emotional impact of political unrest on their pupils, specifically, and children in Haiti, more generally. These *peyi lòk* disruptions occurring prior to the pandemic would deny students several additional months of in-person class instruction.

TAB 11. Primary School Disruption during ‘Peyi Lòk’ by Urban / Rural

	Rural	Urban	Total
No	58 (89%)	7 (11%)	65 (13%)
Yes, but the school sent lessons (paper-based or virtual)	0 (0%)	47 (100%)	47 (9%)
Yes, school was closed	43 (11%)	354 (89%)	397 (78%)
Don't know	0 (0%)	2 (100%)	2 (<1%)
Total	101 (20%)	410 (80%)	511 (100%)

During a focus group discussion, one educator commented on the months of school closures and what these disruptions meant for primary school students:

“...generally speaking, whether it’s peyi lòk, first lock[down], second lock[down], or another, whether it’s COVID-19 it has a great impact on the education system. If you take primary education which is the foundation of any level [of education] you wish to attain once the child accumulates all of these gaps, they will stay with them forever.”

Such concerns regarding the lost weeks, and in some cases months, of in-class learning are still being debated. In the US, these concerns are expressed in terms of a “lost generation” (Strauss, 2020), in which case some fear students will never fully recover from such educational disruptions. However, these concerns may be legitimate in a context characterised by extreme structural violence including political and economic instability as well as a compromised and largely inaccessible healthcare system during a global pandemic.

Educationally, the *peyi lòk* movement and the closure of schools due to COVID-19 have had negative impacts on children's learning. With the closure of approximately 70% of schools during the political *lòk* [lockdown] and full closures for about 5 months due to the public health *lòk* [lockdown], the teaching/learning process has been severely disrupted. Children who cannot attend school and/or do not have the necessary supports at home to facilitate learning may develop severe learning delays. These two events also help to reinforce the inequalities that exist between different quality and types of schools in Haiti (Luzincourt & Gulbrandson, 2010).

TAB 12. Type of Primary School Attended by Urban / Rural

	Rural	Urban	Total
Private community school	1 (10%)	9 (90%)	10
Private parochial school	10 (16%)	54 (84%)	64
Private school	65 (19%)	273 (81%)	338
Public school	25 (25%)	74 (75%)	99
Total	101 (20%)	410 (80%)	511

Against a backdrop where 88% of schools are privately operated due to poor governance and limited government capacity to provide educational services, many families face the reality of paying tuition, although the Haitian Constitution guarantees the basic right of children to the first six years of schooling (UNESCO, 2017; UNESCO, 2020). It is clear in **Table 12** that this is the case in the study sample as well, where **81%** of students attend some sort of private institution. There are no significant differences in the overall proportions as compared to the urban and rural proportions. It seems, however, that access to private community schools may be higher in urban areas. Data was also collected on whether families received outside support from migrants to cover school fees or tuition payments, but no significant findings were unearthed. It is interesting to note, however, that of the **68** respondents receiving financial support for Child #1’s tuition, only **four** households were rural. This could suggest that there are differences in access to remittances across urban and rural sub-groups—and that urban households with migrants abroad may have more direct access to resources than rural households with migrants.

TAB 13. Challenges of Home-schooling by Urban / Rural

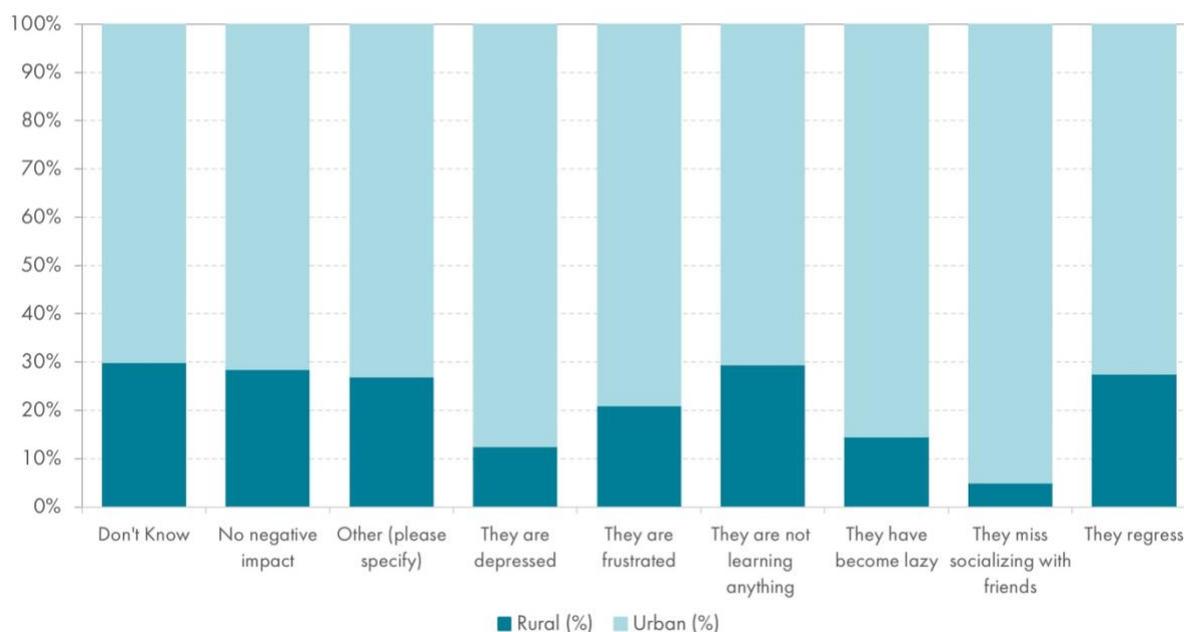
	Rural	Urban	Total
Motivational issues	0 (0%)	10 (100%)	10 (7%)
We are not teachers; we cannot educate them properly	1 (3%)	35 (97%)	36 (24%)
We don't have a designated workspace for the child/children	0 (0%)	17 (100%)	17 (11%)
We don't have a set schedule for their schooling	0 (0%)	5 (100%)	5 (3%)
We don't have sufficient materials for the child/children (e.g., paper, pens, pencils, notebooks, etc.)	0 (0%)	7 (100%)	7 (5%)
We don't have the proper equipment/technology for them to do their work	0 (0%)	22 (100%)	22 (15%)
We don't have time to do their lessons with them	0 (0%)	21 (100%)	21 (14%)
Don't know	0 (0%)	5 (100%)	5 (3%)
Other (please specify)	6 (24%)	19 (76%)	25 (17%)
Total	7 (47%)	141 (53%)	148 (100%)

There were very few rural responses to questions regarding the challenges of home-schooling. This is understandable as rural participants with elementary school aged children were less likely to experience educational disruptions during the pandemic. Almost one-fourth (**24.8%**, or **35** of **141**) of urban parents who reported experiencing challenges with home schooling complained that they were not teachers. This is understandable as Haiti has historically been plagued by high levels of illiteracy and low educational attainment that have only in recent decades been addressed as a result of the global Education for All initiative. Naturally, parents might express reluctance to take on the role of an, albeit surrogate, educator. One teacher was concerned about sending work home as he recognised that some parents may not be able to teach the content:

“When you send the work home to the student...the parent may teach it in any manner and sometimes the child will not really understand it. The parent may not have the level [of education] to explain it to the child.”

The second and third most common challenges reported by urban respondents were lack of proper equipment/technology and insufficient time to assist children with their lessons, respectively.

FIG 13. Reporting of Negative Impact of COVID-19 School Disruption on Children by Urban / Rural



The visualisation in **Figure 13** highlights the main negative impacts of COVID-19 by urban and rural subgroups. In terms of rank, “They are not learning anything during the pandemic” ranks first for the rural sub-group while “They have become lazy” ranks first for the urban sub-group. These two categories make up more than half of the responses for each sub-group as well as for the overall sample. It is important to note that “They regress” was coded as a response category posteriorly due to its relative significance as a response in the “Other” category. During focus group discussions, educators expressed similar concerns for students: “*You get the impression that they are having trouble with reading, they are having trouble with math, they are having trouble memorizing!*” However, one teacher expressed concern about the economic impact of these disruptions which have reduced family incomes: “*If there isn’t enough money in the household, [the student] may be malnourished. [That] can make it difficult to study.*”

One topic that emerged during focus group discussions was students’ fears regarding the COVID-19 virus:

“When we were closing [the school], there were children who were saying, ‘I’m going to die.’ It got to the point where if a student sneezed all the children ran. They were very afraid especially when they heard that [the government] was digging [burial] holes, they were preparing for people to die. There were children who left [school] that same day.”

This teacher’s statement refers to government projections suggesting that by summer 2020 the death toll would rise substantially. In response, the government began preparing mass burial sites for COVID-19 victims. This, understandably, may have very well had a profound psychological impact on some pupils.

TAB 14. Children in the Household Engaged in Virtual Learning by Urban / Rural

	Rural	Urban	Total
No	90 (22%)	327 (78%)	417 (82%)
Yes	10 (11%)	83 (89%)	93 (18%)
Total	100 (20%)	410 (80%)	510 (100%)

In **Table 14**, a tabulation of children who were engaged in virtual learning during the pandemic is given by urban/rural (a “Yes” response indicates that they were engaged in virtual learning). The results contain many NA answers (blank responses), particularly in the rural sub-group. Given the limited telecommunications and internet infrastructure in Haiti overall, it would be challenging, at best, and nearly impossible in most rural contexts for students to engage in virtual learning. In examining **Table 13**, only **10%** of rural households have children engaged in virtual learning compared to **20%** of the urban context. Irrespective of sub-group, more than **80%** of households reported not having children engaged in virtual learning (**417** out of **510** respondents). This data is consistent with a recent report titled, *How Many Children and Youth Have Internet Connection at Home?*, co-published by UNICEF and l’Union internationale des télécommunications, which found that 80% of school-aged children in Haiti did not have an internet connection at home, compared with 49% in the Latin America and Caribbean region (UNICEF, 2020). These results highlight the significant challenges Haiti is facing with regard to the digital transformation in the largely privatized education sector.

FIG 14. Most Frequently Cited Media for Remote Learning

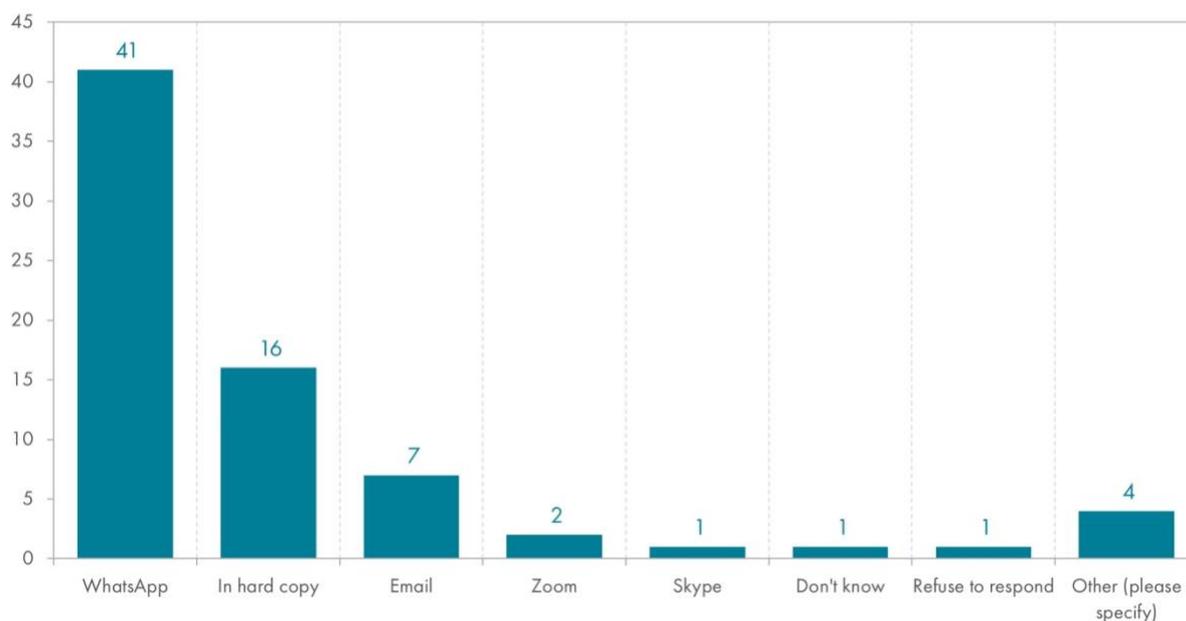


Figure 14 shows the most common ways assignments were sent to Child #1. Due to the multiple response categories, bivariate tabulations were not possible for this indicator. WhatsApp and hard copy assignments were the most frequently used media to send assignments to students, followed by email. During an interview, a teacher described her virtual lesson:

“We had...a virtual program. We shared it with parents via our WhatsApp group in Mirebalais...We had the parents come pick up the program so that they could go [home] and work with their children. Even if the parent could not read, the child, based on what they already knew, so long as the parent glanced over him/her, the child would be able to do the work. And we asked them to bring us this notebook for corrections because if the child’s work is not corrected, they will not get real encouragement.”

What this statement suggests is that virtual learning as it is practiced in this context reflects the technological limitations of the country. In fact, virtual learning, as practiced here, requires face-to-face contact between educators and parents to both “pick up” the virtual program and turn in student assignments. This is not surprising as in addition to the low internet access rates cited above, in 2017, Haiti had some of the lowest cellular phone subscriber rates in the LAC region at **54%** and the lowest smartphone adoption rates at **35%**, the latter a distinction it shared with Bolivia (GSMA, 2018). One teacher described the poor telecommunications infrastructure in her area:

“There are areas where the child will not get any [signal]. Even me, sometimes I don’t have any signal at home despite having unlimited service. It’s true that parents will complain, they will tell you they have a [service] plan, it will be expensive. But I think it’s the only way in the context of COVID-19 and peyi lòk, because both teachers and students have to protect themselves. Distance learning is the best option.”

The nation’s poor quality and expensive telecommunications system renders it challenging to adopt a robust virtual learning program, which explains the low rates of response to these indicators, as only about **8%** of households cited WhatsApp (the most frequent response) as the most commonly used medium for virtual learning and there was a clear over-reliance on paper-based assignments. Therefore, virtual learning as it is understood in the Haiti context has reduced direct contact between teachers and pupils and facilitated some level of learning outside of the school structure and classroom. However, in many regards it does not qualify as virtual learning in a technical sense as it does not necessarily involve the use of computers or the internet to enhance students’ instructional experience in an online environment.

The COVID-19 pandemic has ushered in new urgency towards understanding the impacts of the digital transformation on educational systems worldwide. While there is a consensus that digital technologies have the potential to improve educational outcomes, COVID-19 has increased educational inequalities at all levels (Unwin et al., 2020). This is unlikely to change without a focus on the most marginalised communities. In an October 2020 report titled, *Education for the Most Marginalised post-COVID-19*, Edtechub identifies seven general groups that are especially vulnerable to the processes of marginalisation: “out-of-school youth, those with disabilities, girls and women, refugees and displaced persons, ethnic minorities and indigenous peoples, those in isolated areas, and those in informal or irregular employment” (ibid). Although there is no specific mention of Haiti in the report, much of the Haitian population falls within one or more of these categories. Students from low-income socioeconomic backgrounds, with less access to digital technologies, and with less support from parents are also likely to experience the negative effects of the COVID-19 pandemic on long-term educational outcomes (OECD, 2020). Although many effects are not yet quantifiable, exploratory studies have expressed concerns that the educational gap is likely to widen if digital transformation is not actively managed in a holistic way by governments and other stakeholders.

TAB 15. Households Paying for Tutoring Before the Pandemic (Rows) vs. Now (Columns)

	Not paying (after)	Paying (after)	Total
Not paying (before)	12 (46%)	14 (54%)	26 (26%)
Paying (before)	9 (12%)	66 (88%)	75 (74%)
Total	21 (21%)	80 (79%)	101 (100%)

Table 15 provides a cross-tabulation of families that were paying for tutoring before the pandemic versus during the pandemic. It is notable that around half (**54%**) of those that were not paying for tutoring before the pandemic started to. However, most respondents (**66%** of the grand total) that were paying for tutoring services at the time of the interview had secured tutoring services for their child before the coronavirus pandemic.

3.4 COMMUNITY PERCEPTIONS OF COVID-19

In order to appreciate the potential threat widespread infection may have on Haiti, it is important to understand poverty and health in this context. More than half (**59%**) of the population live below the national poverty line and just under one-quarter (**24%**) live in extreme poverty (IDB, 2020). Haiti ranks 169 out of 189 countries on the Human Development Index, which is not surprising as only **4%** of the nation's GDP is dedicated to social spending (ibid). Haiti has just under 1,000 health institutions, serving a population of 11 million, of which nearly half are located in the capital region (Louis-Jean et al., 2020). One-third of Haitians suffered acute food insecurity prior to the pandemic (IDB, 2020). And as Haiti is heavily dependent on imports for its food supply, anticipated disruptions in agricultural trade will have serious implications for this largely agrarian, food insecure island nation (ibid). These factors should serve as the backdrop against which Haitian perceptions of COVID-19 are examined.

In terms of perceptions of study participants, most individuals (**55%**; **280**) changed their opinion of the pandemic over time, although a significant proportion (**45%**; **231**) did not. Notably, of those who changed their opinion of the pandemic, more (**65%**) changed their perceptions from subjectively negative categories (“*There is no coronavirus*”; “*The coronavirus is nothing to worry about*”) to positive ones (“*We need to take certain precautions so that we are not infected*”; “*The coronavirus is very dangerous for Haiti*”). This could indicate a potential increase in awareness and acknowledgment of the potential threat of COVID-19 over the course of the pandemic.

During a focus group discussion with teachers, one shared: “*Before schools were closed, even as a classroom teacher you didn't really know what the virus was. Based on everything you heard you got the impression that no one was really able to protect themselves.*” This participant's statement suggests that people may have felt helpless at the outset of the pandemic as they lacked critical information to protect themselves against the virus. It can be surmised that as more information was disseminated to the public by the Ministry of Public Health and Population (MSPP in French) and the WHO over time, that sense of helplessness may have abated giving rise to a greater sense of control over one's ability to protect themselves and their families.

Table 17 illustrates the most common measures taken by Haitian households against COVID-19. One hundred and ninety-nine (**199**) respondents (**38.9%**) cited adhering to **three or more** of the recommended public health measures against COVID-19 (“I wear a mask when in public”; “I wash my hands regularly when in public”; “I keep my distance from others when in public”). It is important to note

that “I use a natural remedy (such as tea)” was coded posteriorly due to its link to the research sub-question on this theme. Overall, **18** respondents (**3.5%**) cited using this strategy.

Although **29** respondents (**6%**) reported sustaining subjectively negative responses regarding their perceptions of the pandemic (“*There is no coronavirus*”; “*The coronavirus is nothing to worry about*”), only **17** respondents reported not taking any measures to protect themselves against infection. Of those **29** that maintained the perception that the virus was not cause for serious concern or were COVID-19 deniers, **8** (almost one-third) cited adhering to three or more of the recommended public health measures. While we cannot conclusively explain these discrepancies, there are three possible hypotheses that we must bear in mind; first, we must consider that some of these participants may have responded in terms of the measures taken in adherence with the government issued orders despite their own perceptions, particularly in public settings; another hypothesis would suggest that peer pressure or public shaming might compel individuals to adhere to these measures even if they did not believe the virus was real or a real threat, and finally, social desirability could provide alternative explanation for these discrepancies.

It should be noted that there is not always consistency between what people say they do and their actual daily practices. This is a problem that we often face in research, and this is what is referred to as social desirability. People tend to project a socially acceptable image of themselves to others even if it means obscuring their true behaviour. This is suggested by the comparison between our observations and what participants’ responses to questions regarding their adherence to WHO and MSPP recommended protective measures against COVID-19. Indeed, a high percentage of participants said they applied the measures recommended by the authorities, including wearing a mask (**89.63%**), hand washing (**67.71%**), and social distancing (**48.92%**). However, the reality on the ground appears to be markedly different. In all the departments that were included in this study, our findings show that people hardly ever wore masks. We were able to observe crowds of people in public markets, neighbourhoods, and on public transportation not wearing masks. People were observed wearing masks at banks and supermarkets, where they were required, and the policy was strictly enforced. However, in public places, enforcement was uneven, at best, and largely non-existent, in most cases. The widespread failure to comply with government recommended protective measures reflects a certain denial of the existence of COVID-19 or, at the very least, a denial of the potential risks associated with infection.

The denial observed at the population level seems to contrast, to a certain extent, with attitudes at the very beginning of the pandemic. At first, the pandemic seemed to have created a situation of panic among the population which was made evident through the stigmatization of those believed to be infected in several parts of the country. The case of university professor B.N., who was suspected of being infected with COVID-19 and had his life threatened by members of the community, is revealing. The following anecdote details B.N.’s plight, at the State University of Haiti’s Limonade’s campus, seeking medical attention to determine if, in fact, he was infected with the COVID-19 virus. A professor at the University of Limonade, Mr. N., returned from a trip to the United States on March 13, 2020. A few days later, on March 17, 2020, he experienced symptoms resembling COVID-19. After unsuccessful attempts to get in touch with officials at the MSPP, he decided to post the information on Facebook, alerting the people he had been in contact with since his return from the United States and cautioning them to be careful. Shortly afterwards, a student informed him that he had informed an official of the MSPP who was going to contact him. The official never informed B.N. that his case had been logged at the MSPP, he did, however, call Professor B.N. 10 hours after a team was dispatched to take samples from him for testing. In the meantime, the professor, who had remained home as a precaution, began to receive threats. Some community members threatened to burn down his residence. Faced with this situation, he contacted the President of the university, who sent an ambulance to evacuate him from his residence. When the ambulance arrived, they headed to a hospital in the neighbouring city of Milot. However, along the way he received a call informing him that the health personnel at the hospital in Milot were not prepared to receive him. He then decided to return home and contacted the

departmental director of the MSPP. The MSPP director instructed him to wait outside of the university where an "unmarked" car would pick him up. It was then that he saw a bus full of passengers heading toward the ambulance that was transporting him. People with iron batons got off the bus and asked if it was the "Coronavirus ambulance." The professor reported that his life was saved by the vigilance of the driver who told the mob he was not transporting any sick passengers.

Faced with danger, the driver decided to turn back again. This time the ambulance took him to the Baptist Convention Hospital, near the town of Limonade. Feeling that he was not safe, B.N. decided to leave the northern region altogether. Hiding his face, he managed to return to Port-au-Prince, where he joined his family.

Subsequently, the students of the State University of Haiti's Limonade campus were also subjected to threats, and some even suffered physical attacks (Senate, 2020). During our interviews, students reported the following: *"We were all exposed but two weeks later it was going to be fine because people understood that what they thought was unfounded, the area has not turned into an epicentre of contamination."*

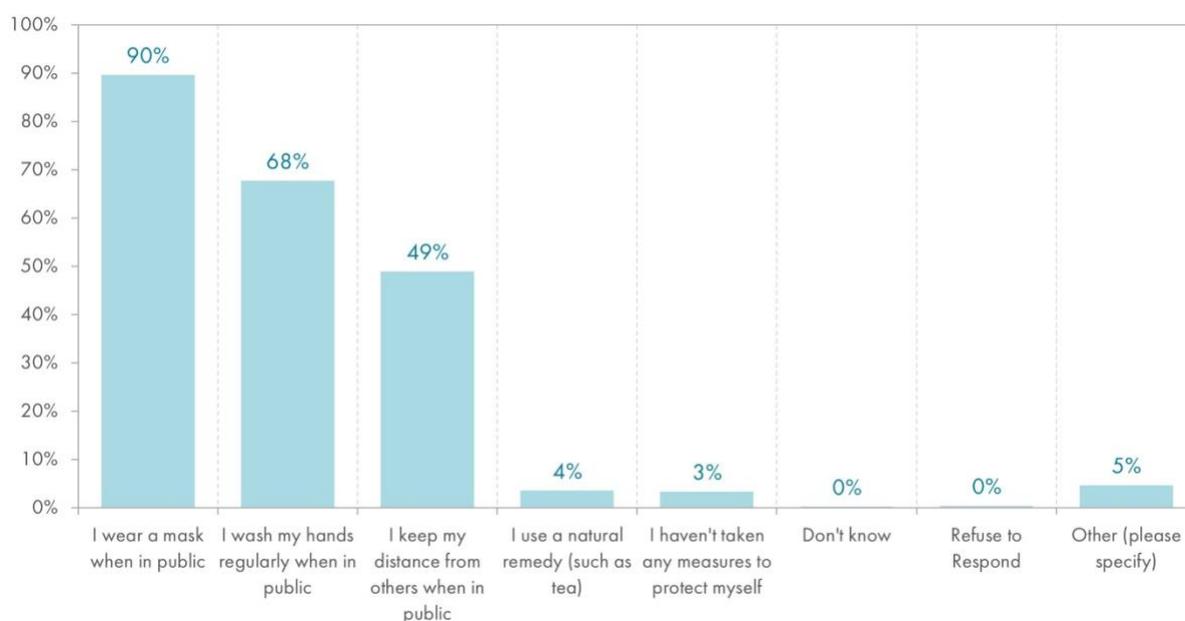
There was also the case of Burel Fontilus, a pastor living in Carrefour, a commune in the Ouest Department. Having contracted COVID-19 upon returning from a trip overseas, he claims to have been threatened. Reported by Senate (2020) Mr. Fontilus explained:

"I received threats. But my wife protected me from the calls. The entire population of Carrefour agreed to kill me."

"All social networks knew I was sick. They accused me of circulating and spreading the disease. So, everyone was looking at me, maybe to lynch me in the street."

These events were reported in the local press. During our discussions with investigators, some pointed out that because of these events, people tended to keep cases of COVID-19 infection in their families a secret, as a way to protect themselves against potential acts of violence.

FIG 15. Most Common Measures Taken Against COVID-19



3.5 THE HAITIAN GOVERNMENT'S RESPONSE TO COVID-19

Haiti declared its first cases of COVID-19 on March 19, 2020. According to the latest figures released by the MSPP, as of November 11, 2020, the country has had a total of 9,168 cases of infection and 232 deaths due to COVID-19 since the start of the pandemic. At the 32nd epidemiological week, a total of 18,918 people had been “suspected” and “tested” for COVID-19 and the total incidence of the disease was 67 cases per 100,000 inhabitants nationwide, with an overall mortality rate of 2.65% and a positivity rate of 37.9% (Dely, 2020). In comparison, the neighbouring Dominican Republic, which has a population comparable in size to that of Haiti, reported that by August 8, 2020, a total of 79,732 confirmed cases of COVID-19 and 1,309 deaths from the disease. This reflects a cumulative incidence rate of 763 cases per 100,000 inhabitants (*ibid*). Haiti has certainly not been completely spared of the COVID-19 pandemic; however, its impact on the population has been “almost minimal to date” (Laroche, 2020, p. 20).

However, it seems useful to recall that despite the measures taken by the authorities to close the borders and restrict the movement of people as soon as the first cases of infection were discovered, the country continued to receive migrants deported from the United States and thousands of migrants returning from the Dominican Republic (Fortin, 2020; Sieff, 2020), with some cases of exposure to the virus in detention centres, particularly in the United States, and without any testing or surveillance by local health authorities upon their return to the country. This flow of return migrants is considered by many as the main source of transmission of the virus in Haiti.

In addition, some question the Haitian government's response to the COVID-19 pandemic. Laroche (2020) points out that millions of dollars have been disbursed to address the pandemic in Haiti; however, no known national plan to address the public health crisis has been developed or disseminated, which may explain public scepticism and government mistrust regarding the pandemic as reported in our study findings. Laroche (2020) mentions the purchase of high-priced equipment by the government deemed unsuitable for the Haitian context and despite the absence of competent personnel to use, maintain, and repair it. Finally, he cites the lack of large-scale screening tests adapted to the Haitian reality as evidence of the Haitian government's lack of political will to address and, if necessary, curtail this pandemic. Notably, our data suggests that among study participants, government mistrust with respect to the pandemic was and has remained relatively low with only 22 respondents (4%) reporting that the “government was playing politics with the virus” at the onset of the pandemic, a number that is reduced to slightly less than half (12, or 2%) holding this perception at the time of the survey.

4. CONCLUSION

Haiti has been plagued by a number of crises in the 21st century. Political crises have emerged due to corruption, poor governance, impunity and the absence of rule of law, and the failure of the Haitian government to fulfil its basic duties toward its citizens. Some of the population's dissatisfaction has found an outlet in the *Peyi lòk* movement that, in many ways, stagnated the economy in 2018 and 2019. Unfortunately, the political situation has created conditions for alternate forms of governance to emerge, wedding the political system to organized crime and gang violence in order to maintain power and some semblance of control. The situation has exacerbated the plight of the poor, women, and girls, making them more vulnerable than ever before. And as the sociopolitical situation worsens and the economy deteriorates, the threat of recurrent disasters looms large—the result of Haiti's location in the Caribbean basin and destructive human interactions with the environment.

This is the backdrop against which this study report must be considered. The COVID-19 public health crisis is, in fact, a crisis within crises. The pandemic has exacerbated conditions that pre-existed it. It has slowed down an economy that has been in a downward spiral since July 2018. It has negatively impacted the livelihoods of Haitian families in urban and rural settings, and for a short period reduced remittance transfers.

During the pandemic, schools were closed. Alternative education plans were put in place for virtual learning, and in most cases, such learning simply denoted the distance between teacher and pupil. Distance learning was a virtual impossibility in Haiti due to technological and internet access issues. The implications of these disruptions, particularly for urban school children who spent most of the 2019-2020 school year at home, remain to be seen. However, we can anticipate that such disruptions will have serious long-term academic and child development consequences for Haitian students.

As has been evidenced across the globe, vulnerable populations have suffered the brunt of the pandemic. The vulnerable are overrepresented as essential workers, engage in low-wage jobs and/or in the informal economy, have limited access to healthcare, live in precarious conditions, and are unable to practice social distancing. This report provides corroborating data that elucidates how the urban and rural poor, particularly women, girls, and school-aged children, have been disproportionately affected by the pandemic. It is critical that policymakers, donors, healthcare professionals, educators, and others do not prematurely attribute current vulnerabilities exclusively to this public health crisis but are attentive to the pre-existing circumstances that have exacerbated Haitian vulnerability during the pandemic. Failure to recognize the entrenched nature of marginalisation may result in short-term interventions that respond to the pandemic yet fall short of meeting the needs of Haiti's urban and rural population.

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APPENDIX I – QUESTIONNAIRE TOPICS FROM STUDY

Section 1: Demographics

- Gender; Age; Marital Status; Number of Children; Educational Attainment; Number of People in Household.

Section 2: The Impact of COVID-19

- Livelihood Activities Before/During the Pandemic; COVID-19 Impact on Finances; Perceptions of COVID-19 Before/During the Pandemic; Preventative Measures Taken; Expectations of Life in 6 Months.

Section 3: Migration and COVID-19

- Host Country of Family Members/Close Friends Living Abroad; Remittance Frequency and Amounts During COVID-19; Use of Remittances; Disruptions to Remittances.

Section 4: Violence and COVID-19

- Perceptions of Violence and Gender-based Violence Before/During COVID-19.

Section 5: COVID-19 and Education in Haiti

- Number of Children in School Before/During COVID-19; Negative Impact of School Closures.

Section 6: COVID-19, Education & Child #1

- Gender; Age; Educational Attainment; Type of School (Public or Private); Tuition Amounts; Tuition Assistance (from People Inside/Outside of Haiti); Type of School (All boys, All girls or Co-Ed); Size of School; Closures during *Peyi Lòk*; Closures due to COVID-19; Home-schooling during COVID-19; Remote Learning during COVID-19; Smartphone Access/Use; Computer Access/Use; Wi-Fi Access/Use; Access to Printing; Support for Schoolwork at Home; Use of Tutoring Services Before/During COVID-19.

Section 7: COVID-19, Education & Child #2*

Section 8: COVID-19, Education & Child #3*

**Sections for Children #2 and #3 are the same as for Child #1*

APPENDIX II – SDE DISTRIBUTION BY DEPARTMENT

SDE Code	City / Locality	Département	Population (2015 Estimate)	Cluster	Households (N)
311_522_109	Cap-Haitien	Nord	274 404	2	34
311_524_122	Cap-Haitien	Nord	274 404	2	34
311-514_059	Cap-Haitien	Nord	274 404	2	34
SDE 3		NORD	1 067 177		102
111_548_302	Port-au-Prince	Ouest	987 310	2	34
111_543_270	Port-au-Prince	Ouest	987 310	2	34
112-503-008	Delmas 32	Ouest	395 260	2	34
112-506-031	Delmas 24	Ouest	395 260	2	34
114_503_024	Pétion Ville/Juvénat	Ouest	376 834	2	34
114_509-036	Pétion Ville/ Loé	Ouest	376 834	2	34
122-018-006	Petit-Goave/Cap Destre	Ouest/rural	172 965	2	34
122-504-024	Petit-Goave/ Centre Ville	Ouest /Urban	172 965	2	34
SDE 8		OUEST	4 029 705		272
632-016-027	Belladere	Centre/Rural/	86 612	2	34
621-503-013	Mirebalais	Centre/Urban- Centre Ville	97 755	2	34
SDE 4		CENTRE	746 236		68
815-501-001	Chambellan	Grande-Anse/Rural	26 459	1	17
815-501-002	Chambellan	Grande-Anse/Rural	26 459	1	17
811-504-017	Jérémie	Grande-Anse/Urban	134 317	1	17
811-506-029	Jérémie	Grande-Anse/Urban	134 317	1	17
SDE 3		Grand-Anse	468 301		68
Grand Totals					
17	NA	NA	6,311,419	32	510



MIDEQ.ORG To ensure that South–South migration reduces inequalities and contributes to development.

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