The social and economic wellbeing of the population severely deteriorated following the outbreak of COVID-19 in Tajikistan, and the country remained far from full recovery at the end of 2020. The number of respondents reporting that no household member was currently working spiked in April and May 2020, and although the labor market quickly regained lost ground thereafter, a second surge in joblessness took hold in November. Open job vacancies posted online remained significantly lower than pre-crisis highs. A similar two-peaked deterioration was reported for worse household financial conditions and rising food insecurity in 2020. Since the outbreak, between 15 and 20 percent of those reporting a need for medical treatment said they were unable to obtain it. Government programs to combat the effects of the pandemic have had a positive impact. Direct COVID-19 messaging campaigns through the Mobile Engage initiative and in-person information from healthcare providers were associated with more risk reduction behaviors such as mask wearing and less travel. Since the outbreak, about 14 percent of households reported receiving new financial or in-kind support from government at least once.

Livelihoods

Employment sharply deteriorated following the outbreak and despite regaining some lost ground, ended the year lower. The share of respondents reporting that no member had worked in the preceding week spiked to nearly 40 percent in May 2020. Although reported work returned to its pre-crisis level by August, joblessness again surged in November, ending the year 8 percentage points above the same period in 2019. Disruptions in work became less pervasive over the course of the year: in May, 62 percent of respondents reported a household member with some type of disruption, falling to about 27 percent in December. However, a rising share who halted work were reported as “unlikely to resume,” rising from 20 percent to 78 percent in December, before falling again to about 47 percent in January 2021.
From a peak in mid-March before the outbreak, the number of open vacancies posted on popular site somon.tj fell by about 73 percent during the first phase of the crisis. While online job vacancy posts are largely limited to urban areas and particular sectors in Tajikistan, for these segments they provide a valuable forward-looking measure of the health of the labor market. Following a steep decline at the beginning of the crisis, vacancies recovered and briefly surpassed the pre-crisis peak, before again falling and ending the year about 34 percent lower (nearly the same level in January 2020). The composition of the decline and subsequent recovery was uneven by sector. Those occupations more exposed to the impact of crisis — including work in hotels, tourism, restaurants, retail sales, and secretarial activities — were more volatile in 2020, and remained below pre-crisis levels at the end of the year. Less exposed or complementary occupations — including medicine, construction, general management, banking, and accounting — were less volatile and had fallen by less at the end of 2020.

**Notes:** Data courtesy of somon.tj

Fewer people faced severe financial strain later in the year, and about 14 percent of households report having received some support from government. The share with deteriorating finances rose swiftly following the outbreak and moderated from a peak in May 2020, only to resurge in November. However, the share who believe they could pay an emergency expense of 100 somoni (about $10) steadily improved from 43 percent in May to 68 percent in January 2021. Those who received social assistance were more likely to report an ability to pay for an emergency expense. Overall concerns about the economic impacts of the crisis moderated steadily over the course of the year. The share who reported being very concerned about the impact of COVID-19 on the economy and their livelihoods fell from above 75 percent in May, to below 36 percent in January 2021, with a large majority changing their answer to being “somewhat” concerned.

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Migration and Remittances

Temporary job loss among migrants already abroad was very common during the crisis. The share of migrants reported to be actively working fell from 89 percent in February to 25 percent in April. Working gradually recovered among those already abroad, converging to 2019 levels by the end of the year. However, with borders closed due to the pandemic, seasonal migration was abruptly cut short in April 2020, leaving a much smaller cohort of migrants abroad, reducing the remittance income households typically rely on, and as migrants gradually returned the number abroad fell over the rest of year. On the other hand, interest in migrating abroad for work in the future rose in the latter half of 2020. After falling to only 2 percent of households in May 2020, interest rose above 14 percent of households by January 2021, significantly higher than the same time in 2019.

Remittance income fell dramatically in April among households with migrants already abroad but recovered lost ground through the rest of the year. Rather than having fully lost employment arrangements, respondents usually reported short-term income loss among migrants as the cause of less frequent remittance transfers. The share of migrants sending remittances over the preceding 10 days caught up to the 2019 level at the end of the year, likely due to fewer migrants returning than is seasonally typical. About 62 percent of recipient households reported a decline in remittances in April, the highest share ever recorded in the L2T survey. However, expectations of continued transfers steadily closed the gap with 2019 levels through the remainder of the year. However, an extended period of lower remittances is expected to have pushed the poverty rate higher in 2020. Poor households in the country depend much more on remittances than those better off. More than 80 percent of households that receive remittances reported that they primarily spend them on food and other necessities.

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Food Security and Spending

Reports of reduced food consumption spiked twice in 2020 and remained 10 percentage points above 2019 levels at the end of the year. More than 35 percent of households reported that children in their household ate fewer than 3 full meals in May and June. Overall food security deteriorated during the peak of the crisis across a range of indicators, with rising shares reporting going hungry, reducing dietary diversity, and worries over obtaining enough food. Similar increases in vulnerability were seen in reduced ability to pay for utilities, and in coping mechanisms such as selling assets and reduced spending on medical care. Each was negatively associated with income, while very few households reported local shortages of basic goods, suggesting that falling income may be a key driver of deprivation. Less than one percent of respondents reported that items are out-of-stock in January 2021, down substantially from 10 percent in May 2020.
Since April, between 15 and 25 percent of those reporting having needed medical care say they were unable to get it. Since the pandemic began, on average between 19 and 30 percent of households per month report that at least one member has needed in-person medical treatment. However, a large share report that they were unsuccessful in getting the treatment they sought. In July, only 84 percent reported success, falling to 74 percent in September, beginning a slow recovery thereafter to reach 81 percent in January 2021. Reports of inability to access care have been higher among those living in urban areas (24 percent of attempts vs. 20 percent in rural areas).
The level of concern about the current risk of potential health impacts from the pandemic have consistently fallen since April 2020. In the early days of the pandemic, about 80 percent of respondents reported being very concerned about the health of their family. By January 2021, the share had fallen to about 35 percent, largely replaced by those saying they are “somewhat” concerned. Very few respondents report not being concerned at all, with a share consistently below 5 percent since April 2020.

Knowledge, Education, and Behavior

**Direct messaging about COVID-19 is associated with more risk reducing behaviors.** During the pandemic, the Mobile Engage initiative led by the Ministry of Health and Social Protection and sponsored by the World Bank sent public health focused SMS messages to the population through the three largest telecom providers in the country. Reporting having received information (both through SMS and/or in-person healthcare campaigns) is associated with greater reporting of risk reducing behavior. Looking in more detail at changes in individual reporting: going from receiving no SMS message in the previous interview to receiving a message in the week before the following interview is associated with increased reporting of mask wearing, safety-related changes to work patterns, reducing visits with friends and relatives, reducing other travel, and safer greetings (fewer handshakes, etc.).

Nearly all respondents report changing at least some routines to reduce the risk of COVID-19. About 97 percent report more handwashing, and a high share report reducing other greetings, such as kissing and hugging, following the outbreak. Reported mask use and social distancing also rose substantially in the early months of the pandemic and remained elevated into early 2020. However, it is important to note that these survey questions measure if the household does these at all, but not whether they are consistently followed.

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A modest share of the population reports official guidance on COVID-19 related matters from government in the week preceding their interview. Since the outbreak, more than 90 percent of respondents have consistently said that they primarily receive information about COVID-19 on TV, and between 30 and 40 percent consistently say that they get information from health professionals in-person. But only about 40 percent of people on average reported getting any official information from government on TV in the week preceding the interview on average, and less than 10 percent of respondents reported information from any other source. These results suggest that TV may be the most effective mode of official communication on COVID-19, and that communication frequency (on risk reduction, vaccination, etc.) could be increased.