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Reimagining Vulnerability in the Light of Covid-19: A Qualitative Study

Ranmini Vithanagama

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**International Centre for Ethnic Studies
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**Reimagining Vulnerability in the
Light of Covid-19:
A Qualitative Study**

by

Ranmini Vithanagama*

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Nadine and Viyanga led the overall qualitative study, ensuring the quality, consistency and depth of inquiry were maintained across all 72 in-depth interviews. I am also grateful for Nadine and Viyanga for taking time off their busy schedules to

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Executive Summary

Introduction

The COVID-19 pandemic, which was initially hoped to be ‘a great leveller’, ended up exacerbating existing socioeconomic inequalities within and across economies globally. The sobering socioeconomic impacts of the pandemic have reignited the discourse on vulnerability, and our study was conceived out of this collective congruence towards reimagining vulnerability in the post-COVID world. In this study, we set out to explore sources of household socioeconomic vulnerability in the light of the lived experiences of a purposive sample of 72 respondents from six districts, during the pandemic and the subsequent economic crisis. We attempted to take on a more holistic approach to vulnerability - as a deviation from one’s perceived good life - to dissect not just the usual suspects, but also the undercurrents of exclusionary barriers that heighten risks for some individuals more than others.

Impacts of the pandemic

We trace the impacts of the pandemic along two strands. The first is the health impact. The fear of contracting the virus was particularly pronounced at the outset, but as more information on responding to the situation became available, most of the respondents and their households had taken proactive measures to mitigate the risks of becoming infected. Most households had taken measures to bolster their immunity, adhered to safety guidelines issued by the government and obtained the recommended vaccines. Only about a quarter of the households in our sample had contracted the virus, and no long-lasting physical impacts were reported. However, many respondents who had contracted the virus discussed the emotional toll it took on them, such as the fear of passing on the virus to family members, especially those with compromised health conditions, being sent away for quarantine, loneliness and isolation, and a sense of discrimination from within the community. Feelings of guilt over leaving children behind and being unable to take care of household activities and family members were pronounced among female respondents who had contracted the virus.

The pervasive psychosocial stress stemming from isolation, loneliness and socioeconomic uncertainties was rampant, regardless of whether respondents or their households had been infected with the virus or not. The implementation of social distancing measures aimed at controlling the spread of the virus led to a collapse of spatial boundaries, exacerbating stress and restlessness among household members. Simultaneously, the strain of these pandemic control initiatives on the social fabric manifested in feelings of abandonment, fear and emotional stress among the respondents.

Nevertheless, the most egregious impact of the pandemic and related prevention measures has been on the livelihoods and incomes of respondents and their households. Although only a small number of households had experienced permanent job losses, many households earning incomes from agriculture, fishing, micro, small and medium enterprises, casual labour, as well as temporary, part-time and casual jobs had experienced substantial reductions in their incomes during the pandemic. A handful of households had lost all sources of income except for government transfer payments. Conversely, those reliant on monthly wage income from formal sector jobs were insulated from the pandemic's economic impact. Interestingly, a few respondents managed to improve their incomes during the pandemic by seizing unique business opportunities that the situation presented.

The extent of the socioeconomic vulnerabilities induced by the pandemic were shaped by intersecting challenges unique to each household. The negative economic impacts of the pandemic were particularly harsh for households that were living in unfavourable pre-pandemic economic conditions. On the other hand, the simultaneous blow of both health and economic impacts of the pandemic rendered several households significantly more vulnerable compared to those contending with just one of the two impacts. Persons with disabilities and with diverse sexual orientations and gender identities faced additional layers of vulnerabilities in navigating the pandemic-induced socioeconomic challenges as they struggled with loss of income, isolation and economic uncertainty.

A decline in the quality of education amidst a shift to online schooling was evident across the board, although the disadvantages were disproportionately higher among poorer households. The many obstacles to participating in online classes, such as the non-availability and inadequacy of devices, lack of reliable and stable internet

connections, difficulty to afford internet bills, increased electricity bills, and lack of space and privacy at home marginalised children from the poorest households. In extreme cases, children either missed online school entirely or dropped out of school altogether.

The gendered impact of the pandemic was notably evident in the private sphere, but less so in relation to livelihoods and incomes. The blurring of spatial domains amidst lockdowns, the increased tensions amidst economic stresses and pervading uncertainties rendered women vulnerable to various forms of domestic and intimate partner violence. With more household members spending time at home, children engaging in online education, and households resorting to home-based remedies to bolster immunity and improve household hygiene, the domestic chores performed by women increased.

Impact of the economic crisis

While our study was originally designed to probe into household socioeconomic vulnerabilities precipitated by the pandemic, the economic crisis that unfolded in 2021 compelled us to expand our scope to examine its impacts at the household level as well. We observe two significant differences in the impacts triggered by the economic crisis versus the pandemic. First, unlike the pandemic, the economic crisis had a universally negative impact on household economic conditions. Second, unlike the pandemic, whose economic impacts were transmitted predominantly through the labour market, the impact of the economic crisis was channelled through the commodities market. The increased cost of living due to the sharp increase in prices of goods and services, as well as the shortage of essential supplies, was a challenge all households in our sample grappled with. Households that were already adversely affected by the pandemic found themselves thrust further into economic distress amidst a sharp erosion of their real incomes.

Many households found themselves unable to meet their household expenses with their incomes, forcing them to make significant adjustments by cutting down on non-essential and recreational spending. Shortages of essential items such as gas, medicine and fuel further exacerbated feelings of vulnerability among many respondents. Larger households experienced a notable increase in their food costs, while those with children saw a sharp rise in educational expenses. Business owners

and individuals engaged in self-employment and casual labour faced declining demand due to reduced spending power across the board. Fuel shortages had a particularly negative impact on the livelihoods of the handful of three-wheeler drivers in the sample. Farmers were confronted with a unique set of complications in engaging in their livelihoods, first with the non-availability of fertilizer and pesticides, and then the sharp increase in the prices of such supplies. The increased cost of inputs had made farming unfeasible for most of the farmers in our sample. Pre-existing chronic poverty, disability and, divergent gender identities and sexual orientations aggravated socioeconomic vulnerabilities of respondents who fell into these categories because the significant increase in the cost of living occurred at a time when employment opportunities were extremely limited.

Coping with vulnerability

During the pandemic, we observed two types of coping strategies. The first set of strategies related to dealing with the pandemic itself. For many households, these strategies included home-based precautionary health measures to reduce the risk of contracting the virus, as well as spiritual and religious practices to cope with the pervading uncertainty at the time. We observed a few maladaptive practices among a handful of men, such as resorting to violence against women and increased consumption of alcohol, amidst lockdowns, mobility restrictions and loss of livelihoods and incomes. Meanwhile, many children replaced social interactions with excessive consumption of content on TV, mobile phones and video games. Additionally, we found that the brunt of these maladaptive practices was borne by women as wives, sisters and mothers. The second set of measures were aimed at smoothing the economic impact of the pandemic. Many households tapped into their savings, pawned jewellery, received remittances from abroad, and got financial assistance from extended family, relatives, friends, and employers to make up for income shortfalls. The only recourse available to the poorest households without any of these options were cutting down on food expenses, borrowing informally and cutting back on children's educational expenses.

Many respondents reflected positively on the government's response to the pandemic during the first wave. The vaccination drive was also well-received, although many respondents were critical about not receiving adequate information

about the vaccines, including their benefits and potential side effects. The government's routine and pandemic-specific social protection programmes were a crucial source of income for the poorest and most vulnerable households to meet household expenses. Those who received the government's financial and in-kind support significantly benefited from such assistance. However, the standardised nature of the government's assistance meant that, for larger households, the benefits were much more diluted compared to households with fewer members. The financial or non-financial assistance from non-governmental organisations to households has been quite negligible.

There was a significant increase in the adoption of negative coping mechanisms during the economic crisis as many households had exhausted their safety nets to address the adverse effects of the pandemic. In addition to cutting down on expenditure on essentials such as food, clothing and children's education, several households resorted to reducing portion sizes, skipping meals, lowering the use of electricity, and borrowing and selling household white goods to make ends meet. These coping strategies were particularly detrimental for women, who not only endured increased physical drudgery from unpaid care work, but also suffered from the emotional guilt of having to deny their families, especially children, the things they liked to eat and wear. Unlike during the pandemic, there was no financial or in-kind support from the government, NGOs or religious institutions for households in economic distress.

Positive takeaways

The pandemic, despite its pervasively negative nature, resulted in a few positive outcomes for a handful of households. Lockdowns had afforded several women in our sample an opportunity to (re)discover their passions, hobbies and pastimes and men to spend more time at home with family members. However, this was predominantly limited to households whose incomes were not affected due to the pandemic. In a handful of households, men and boys had shared unpaid household chores with women and girls. Some respondents found time to reflect on their lifestyles, health, spiritual growth, and to better understand and appreciate the roles and responsibilities of their family members. A few respondents experienced positive impacts on their livelihoods as they managed to benefit from business

opportunities that arose during the pandemic, while some managed to build skills and capabilities that can help them develop livelihoods in the future.

Reimagining vulnerability

Our findings align with the idea of vulnerability as a dynamic, relative and context-specific phenomenon. We also find that economic and social dimensions of vulnerability are difficult to neatly delineate. Instead, what we observe is that these two dimensions tend to reinforce each other, influencing the overall experience of household vulnerability. While both the pandemic and the economic crisis have been covariate shocks, the way in which the impacts of these shocks have cascaded into heterogeneous experiences of socioeconomic vulnerability at the individual and household levels has been shaped by the interplay of a number of factors. At the individual level, we observe that factors such as age, gender, physical and mental health conditions, education level, type of employment or livelihood, and gender identity and sexual orientation mediate the socioeconomic impacts of the pandemic. At the household level, pre-existing economic conditions, the number and demographic composition of household members, asset ownership, debt, access to social capital, livelihood strategies and income sources, and housing conditions shape the socioeconomic vulnerabilities of the pandemic.

Moreover, as we saw in a very small number of cases in our sample, the pandemic tended to spawn its own idiosyncratic shocks through virus infections, hospitalisations and deaths which can further exacerbate households' experiences of socioeconomic vulnerability. Spatial characteristics such as population density, access to markets and infrastructure, as well as the quality of healthcare and education can compound the vulnerabilities triggered by the pandemic. The support of the formal institutional framework can be particularly crucial for households in the poorest socioeconomic strata, as we witnessed in our sample.

Importantly, we recognise from our analysis that vulnerability is not experienced in a vacuum, nor is it an abrupt outcome emerging from a shock, although it is thrown into sharp relief during and immediately after an exogenous shock. Instead, it is a time-sliced experience shaped by a myriad of factors over time, including pre-existing conditions, the nature of the shock itself - including its intensity, duration and the aftereffects of policy responses to the shock - and the resources and

opportunities available to households to recover in the aftermath of a shock at the micro, meso and macro level.

Thus, it is important to take a holistic view of socioeconomic vulnerability to strengthen household resilience in the face of a shock, mitigate adverse effects as the shock unfolds, and facilitate recovery in its aftermath. While it is important to differentiate between poverty and vulnerability, it is also critical to recognise the potential for a vicious cycle between these two phenomena. Importantly, the policy environment must be designed not only to address structural weaknesses in economic growth and development but also to tackle systemic barriers and fault lines that marginalise certain groups and individuals and prevent them from fully participating in society. Additionally, addressing the immediate challenges produced by shocks requires the development of well-targeted, benevolent and empowering social protection programmes, safety nets and emergency response mechanisms.

Policy reflections

Even with its weaknesses and shortcomings, we find that the social protection measures implemented by the government during the first wave of the pandemic proved to be quite helpful to those who received them, underscoring the pivotal role these measures play in protecting households facing the greatest economic distress. Providing more generous and tailor-made support that takes into account the different realities of the beneficiaries would be particularly useful. We also highlight the importance of robust, up-to-date and reliable data as an integral part of strengthening both the generosity and targeting of social protection programmes. In addition, helping households in social protection programmes develop livelihood strategies, money management skills and savings habits, and creating awareness on important topics such as climate change, human rights, gender equality and ethnoreligious coexistence can enhance the overall impact of such initiatives.

Emergency policy responses that come at significant economic costs to citizens need to be carefully evaluated. At the very least, abrupt policy responses must be accompanied by some lead time allowing people to adjust for the impending new realities. The detrimental psychosocial effects on citizens from policy responses to external stressors cannot be overlooked and must be addressed through effective

inter-ministerial communication and coordination. Equal consideration should be assigned to economic and non-economic impacts triggered by shocks, as well as policy responses to these shocks.

The right to information should be embedded within emergency response policy frameworks and consistently practised to ensure that citizens are empowered with relevant, timely and accurate information. While the vaccination drive has been effective in reaching the population, we observed several ethical violations, including the insufficiency of available information about the vaccine and its potential side effects. Additionally, health and military officials have been unwilling to provide the necessary information, and citizens have been faced with an impossible choice between taking the vaccine or being excluded from accessing public spaces. While we recognise the importance of vaccination against the COVID-19 virus, providing more information to citizens would have helped dispel misinformation and myths about the impacts of the vaccine.

We also underscore the importance of distinguishing between policies aimed at alleviating poverty and those aimed at reducing vulnerability to poverty. Development initiatives aimed at macroeconomic growth and poverty reduction inherently contribute to reducing household socioeconomic vulnerabilities to external stressors by creating opportunities for improved livelihoods and increased incomes. However, as discussed in the preceding section, policies also need to be formulated, implemented and legally enforced to ensure that dividends of economic growth and development benefits are distributed equitably.

The pandemic and economic shock experiences have yielded valuable lessons for handling similar circumstances in the future. It is important that these insights are considered to enhance existing socioeconomic, emergency response, health, educational and macroeconomic development policies. Moreover, the overarching lessons from these exogenous shocks can be utilised to reevaluate response mechanisms, interventions, adaptation strategies and social protection measures in relation to other types of risks that can exacerbate individual and household-level vulnerabilities, such as climate change, natural disasters, heat stress, and instances of sexual harassment and domestic violence.

Most importantly, adopting a rights-based, pro-poor and socially inclusive approach is fundamental to promoting economic growth, enhancing access to resources and fostering full participation in society, all of which are critical for building enduring resilience against shocks. Applying an intersectionality approach in policy design and implementation becomes increasingly critical for addressing challenges faced by diverse populations. Building institutional capacity and will to promote social justice is crucial, as is the strengthening of the legal framework to empower the rights of the poorest and most marginalised groups and individuals.

“And in the midst of this terrible despair, it offers us a chance to rethink the doomsday machine we have built for ourselves. Nothing could be worse than a return to normality.” – Arundhati Roy (2020)

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Acronyms

| | |
|------|---|
| ADB | Asian Development Bank |
| CBSL | Central Bank of Sri Lanka |
| ERC | Ethical Review Committee |
| GDP | Gross Domestic Product |
| ICES | International Centre for Ethnic Studies |
| IMF | International Monetary Fund |
| PPP | Purchasing Power Parity |
| SDG | Sustainable Development Goal |
| UNDP | United Nations Development Programme |
| WEF | World Economic Forum |
| WFP | World Food Programme |
| WHO | World Health Organization |

1. Introduction

This study was inspired by the ongoing discourse amid the COVID-19 pandemic focusing on the need to reimagine vulnerability in the light of its devastating socioeconomic ramifications. The study's central objective is to examine the economic and social dimensions of household vulnerability in Sri Lanka due to the COVID-19 pandemic. Specifically, the study analyses 72 in-depth interviews conducted with respondents from six districts in Sri Lanka to parse the various ways in which these shocks have influenced household vulnerability, with an explicit focus on the economic and social implications. The study contributes to the growing literature on the topic in the post-pandemic era, and seeks to offer empirical evidence and insights to help reimagine vulnerability in a world that has been shocked to its core by the pandemic.

1.1 Background

The COVID-19 pandemic unleashed upon us a crisis of unprecedented magnitude in recent history. The virus, which was first detected in Wuhan, China in December 2019, swiftly proliferated into 114 countries by March 2020, prompting its official declaration as a global pandemic (World Health Organization [WHO], 2020). A total of about 771 million confirmed cases have been reported so far including about 7 million reported COVID-19 deaths. But, the excess mortality¹ due to the COVID-19 pandemic is much higher. The WHO (2022) estimates that the death toll directly or indirectly associated with the COVID-19 pandemic from January 2020 to December 2021, is estimated to be about 14.9 million (or between 13.3 million and 16.6 million). Alternative estimates suggest that this figure could be even higher². This sobering data points to the severity of the pandemic on human life and health. However, the drastic measures that were required to prevent the spread of the virus have perpetuated a much larger socioeconomic crisis, with far-reaching and long-lasting implications on global poverty and vulnerability.

¹ Excess mortality is the difference between the actual number of deaths from all causes during a crisis and the number of deaths that would be expected under normal circumstances.

² For example, Wang and colleagues (2022) estimate the excess mortality to be about 18.2 million (between 17.1million and 19.6 million) and The Economist magazine estimates this figure over the same period to be around 17.8 million (See estimates at <https://www.economist.com/graphic-detail/coronavirus-excess-deaths-estimates>).

The COVID-19 pandemic is considered to be the worst external shock to have befallen economies since the Great Depression of the 1930s. The International Monetary Fund (IMF) estimates the global economic cost of the pandemic to be over USD 12.5 trillion by 2024 (Reuters, 2022). In 2020, over 90 percent of countries experienced a contraction in their output levels, leading to a 3.2 percent decline in the global Gross Domestic Product and an increase in global poverty in a generation (World Bank, 2022b). About 97 million additional persons were thrust into poverty in 2020 (Mahler et al., 2021), reversing between four and nine years of gains in global poverty reduction efforts (Alkire et al., 2021). Furthermore, irrespective of whether a country falls into a high, middle or low-income bracket, the pandemic has disproportionately burdened individuals who were already vulnerable (World Bank, 2022b). More concerning, the pandemic-induced poverty is projected to persist in the long-term, thus undermining the possibility of achieving the Sustainable Development Goals, especially eradicating global poverty, by 2030 (Gurara et al., 2020; Tateno & Zoundi, 2021).

The path to recovery also appears to be inequitable. In 2021, the global GDP registered a 5.9 percent growth as the pandemic was gradually brought under control (World Bank, 2023a). However, only about 21 percent of low-income countries and 27 percent of middle-income countries had managed to surpass their 2019 per capita income levels in 2021, compared to about 40 percent of the advanced economies which had managed to do so (World Bank, 2022b). Thus, as Gill and Nishio (2021) posit, the poorest economies might take the longest time to recover from the pandemic, exacerbating the income gaps between the richest and poorest countries. More concerning, Mahler and colleagues (2021) fear that the pandemic-induced poverty among the poorest economies might worsen, and at a much faster level, than the pre-pandemic forecasts.

The future economic outlook continues to remain bleak with multiple and overlapping geopolitical, environmental, technological, economic and social risks at play, resulting in what is referred to as a 'polycrisis situation' (Ecker et al., 2023; World Economic Forum [WEF], 2023). Ecker and colleagues (2023) estimate that the cumulative effect of these economic shocks during 2020-2023 have pushed about 165 million individuals worldwide below the USD 3.65-a-day poverty line. The global GDP is estimated to rise only by a meagre 2.1 percent in 2023, and 2.4 percent in 2024 (World Bank, 2023b), and is subject to a number of downside risks,

including debt distress, persistent inflation and geopolitical tensions, especially in South Asia which is home to about 25 percent of the world's poor and vulnerable (Baah et al., 2023).

1.2 Sri Lanka's Pandemic experience

Sri Lanka experienced three distinct waves of the COVID-19 pandemic in 2020 and 2021. The government managed the first wave of the pandemic effectively by taking swift and proactive measures to contain the spread of the virus (Amaratunga et al., 2020; World Bank, 2021b). Simultaneously, the government rolled out a comprehensive social protection programme to support individuals affected by these preventive measures. However, the number of cases, hospitalisations and deaths increased rapidly during the second and third waves of the pandemic outbreak. This escalation can be attributed to several factors: (i) the emergence of more aggressive and contagious variants of the virus compared to the first wave (Katella, 2023; Mallapaty, 2022); (ii) weak surveillance of the spread of the virus (Jayawardena, 2021); (iii) inadequacies in existing healthcare resources to meet the rising demands induced by the pandemic (Amaratunga et al., 2020; Fowsar et al., 2022; Jayawardena, 2021); and (iv) the government's reluctance to impose lockdown protocols (Marso, 2022; Rannan-Eliya et al., n.d.) in part due to the national vaccination programme, which was expected to help control the spread of the virus (Weerasekera & Hewage, 2021). As of mid-January, 2024, a little less than nine months after the pandemic was officially declared over, the total number of confirmed cases and fatalities stood at 672,734 and 16,893 respectively³.

As elsewhere in the world, the pandemic induced a 4.6 percent contraction in the country's economy in 2020, with reversals of growth especially in tourism, textiles, construction, manufacturing and transport sectors (CBSL, 2021). The poverty headcount ratio (USD 3.65 per capita, based on 2017 purchasing power parity) rose to about 12.7 percent in 2020 from 11.9 percent in 2019, pushing about 300,000 more individuals into poverty (World Bank, 2023c). Furthermore, the poverty gap, which measures the distance to the poverty line, is estimated to have widened from 17.9 percent in 2019 to 20.0 percent in 2020 (Ibid). Thus, not only did the number

³ Data as of 15 January 2024. See updated statistics on World Meter available at <https://www.worldometers.info/coronavirus/country/sri-lanka/>

of people living in poverty increase in 2020, but those already in poverty found themselves in deeper poverty in 2020, compared to 2019 (World Bank, 2021a).

1.3 Frying pan to fire: Sri Lanka's economic crisis

As the pandemic was gradually brought under control, Sri Lanka rebounded with the rest of the global economy in 2021, registering GDP expansions of 4.0 percent and 16.3 percent, over the first and second quarters, respectively (CBSL, 2022). However, this growth was short-lived as Sri Lanka's largest economic crisis started unfolding in the second half of the year. While the pandemic and the Easter Attacks in 2019 had a debilitating effect on the domestic economy and the external sector, it was the compounding effects of fiscal mismanagement, imprudent macroeconomic decisions, misuse of monetary policy, and delays in policy responses and action that exacerbated the 2020 economic contraction to a crisis of an unprecedented magnitude. The overlapping effects of sovereign credit downgrading, depleting foreign reserves, an overvalued exchange rate, the negative impact on agricultural production due to the non-availability of fertiliser, weak investor confidence, and an overall global economic downturn brought the local economy to a standstill by early 2022, having registered a modest growth of 3.5 percent in 2021 (for a detailed discussion of Sri Lanka's recent economic crisis see George et al., 2022; Ramakumar, 2022; World Bank, 2022a). In August, 2021, the government declared an economic emergency in a bid to mitigate any adverse effects on the availability and prices of essential foods, following a surge in inflation due to the depreciation of the rupee.

The combined effects of the pandemic and economic crisis clearly illuminated the country's pre-existing economic fault lines. The poverty headcount ratio nearly doubled from 13.1 percent in 2021 to 25.0 percent in 2022 (USD 3.65 per capita at 2017 PPP), shoving 2.5million more people into poverty (World Bank, 2023c). The World Bank estimates that about 500,000 jobs in the industry and service sectors were lost in 2021-22, while those who were still employed in these sectors were likely to have experienced a 15 percent reduction in real income (Hadad-Zervos, 2022). Overall inequality increased from 37.7 percent in 2019 to 39.8 percent in 2022. Urban and rural poverty were estimated to have tripled and doubled to 15 percent and 26 percent respectively, between 2021 and 2022, while the majority of the estate sector population continued live below the USD 3.65 poverty line (Raiser,

2023; World Bank, 2023c). At the same time, children's malnutrition and stunting increased from 7.4 percent to 9.2 percent over the same time period, reflecting the impact of the economic crisis on household food security. The worst affected groups comprised those with irregular and low incomes, limited savings, limited social networks and access to transportation facilities; persons with disabilities and chronic illnesses; the elderly, homeless and displaced persons; informal sector workers; and those working in tourism, transportation, manufacturing and construction sectors (Central Bank of Sri Lanka [CBSL], 2021; World Bank, 2021b).

1.4 'New normal'

The profound impact of the pandemic globally has held up a mirror to our society. On the one hand, the advances in the fields of medicine, science and technology have played a critical role in fighting the virus, treating the infected, addressing new challenges, and adapting to a life of mobility restrictions. On the other hand, it has shone a bright light on the existing inequities and injustices of the world, which have shaped individual experiences of the pandemic not only as a health crisis, but also as a larger socioeconomic and humanitarian crisis.

Nonetheless, this unfortunate experience is not without a silver lining. It has prompted a growing consensus among development practitioners, policy makers, industry leaders, environmental advocates, civil society organisations and the research community that the pandemic has presented an opportunity to build a new normal, and not return to 'business as usual'. In fact, Gupta and colleagues (2021) posit that the pandemic could be the shock that was required to reverse decades of worsening inequalities between the rich and the poor, and to prioritise inclusive development. There is a plethora of material discussing what a post-COVID new normal would look like for various different sectors, including business and entrepreneurship, education, employment and labour market policy, travel and tourism, energy, and climate change mitigation. Many of these discussions argue for strengthening equity in access to opportunities and resources, better stewardship of nature, greater focus on human well-being and sustainable development (See for example, Erdelen & Richardson, 2021; Hedding et al., 2020; McIntyre-Mills, 2020; Ramsay, 2020).

However, creating a new normal requires an interrogation of the assumptions, ideologies, definitions and concepts of the old normal, and to reimagine and reconceptualise them in the light of the pandemic and subsequent shock experiences. First, the pandemic has made it abundantly clear that economic growth that does not benefit the poor comes at a cost. Pre-existing inequities have not only influenced the economic ramifications of the pandemic between and within countries, but also seem to play a deterministic role in their economic recovery in the aftermath of the pandemic (World Bank, 2023b).

Secondly, the pandemic has afforded us an opportunity to reevaluate our prevailing understanding of poverty. The majority of the ‘new poor’, or those who were pushed below the poverty line due to the pandemic, are predominantly from urban areas, with higher educational outcomes and paid jobs in the industry and services sectors, unlike the ‘old poor’ who tend to reside in rural areas, have low education levels and work as own account workers or unpaid family workers (Sánchez-Páramo, 2020). The ‘new poor’ also have more access to infrastructure, and own a few more assets than the ‘old poor’ (Nguyen et al., 2020; Sánchez-Páramo, 2020). Nevertheless, the socioeconomic profile of this new poor segment is closer to that of the old poor than the non-poor (Atanda & Cojocarú, 2021; Nguyen et al., 2020). Moreover, the majority of the pandemic’s new poor are in South Asia and Sub-Saharan Africa (Lakner et al., 2020), where about 85 percent of the world’s poor were concentrated pre-pandemic (Katayama & Wadhwa, 2019). Thus, it is very likely that the individuals who were thrust into poverty due to the pandemic were those who had recently escaped poverty or had been hovering just above the poverty line.

Thirdly, the pandemic experience has compelled us to rethink established definitions of vulnerability. In the light of the pandemic experience, The Lancet (2020) poses the important question of what it is to be vulnerable, emphasising that those who are vulnerable to shocks can change dynamically, depending on how these shocks are confronted and contained. The policy responses aimed at combating the pandemic inadvertently left far more individuals poor and disempowered than those who we typically associate with vulnerability, such as the elderly, persons with disabilities, the homeless and the poor.

The imperative to build back better in the aftermath of the pandemic has also created an opportune platform for reassessing conventional social protection mechanisms. While many countries implemented expansionary fiscal measures such as cash grants, in-kind support, tax holidays and other concessions to support individuals who had lost incomes and livelihoods due to the pandemic, the primary focus of most of these social protection programmes has been the immediate and medium term (Lind et al., 2021; O'Donnell et al., 2021), mirroring the kind of support typically offered in the aftermath of exogenous shocks.

1.5 Objectives of the study

In the backdrop of a global resurgence in interest regarding the issue of vulnerability, we designed this research study with the broader objective of reimagining economic and social vulnerability in Sri Lanka. More specifically, we attempt to systematically investigate underlying and immediate factors that have both contributed to and exacerbated economic and social vulnerability among households in the wake of the COVID-19 pandemic. To do so, the overall study takes on a mixed methods approach to data collection and analysis, employing a household survey to collect quantitative data from 4,000 respondents across eight districts, and conducting in-depth interviews with 72 respondents across six districts to gather qualitative information. In addition, a few case studies focusing on specific economic activities that were significantly affected by the pandemic and vulnerable groups that were further marginalised during the pandemic were also conducted. Thus, the overall research study attempts to not only identify broader and overarching drivers of vulnerability through the quantitative analysis component, but also to unpack the nuances, complexities and intensities of these drivers through its qualitative analysis.

This particular study delves into the analysis of 72 in-depth interviews and attempts to address the following research questions:

- 1) What constitutes a good life for the respondents and what factors deter them from achieving their envisioned version of a good life?
- 2) What were the health, economic, social and psychological impacts of the pandemic on households? How did intersectional vulnerabilities and gendered impacts manifest?

- 3) In what ways did the economic crisis resemble or differ from the pandemic in its impact on households?
- 4) What were the coping mechanisms households adopted to mitigate the health, economic, social and psychological impacts of the pandemic? What coping strategies were employed during the economic crisis?
- 5) To what extent did social capital, institutional support and social protection programmes play a role in mitigating the impacts of the pandemic and the economic crisis?
- 6) What are the future plans, goals and aspirations of the respondents, and how has the pandemic and the economic crisis influenced them?

1.6 Relevance of the study

This research study contributes to a broader global dialogue on a shared challenge. The polycrisis situation that the world has been grappling with since 2020 has been a humbling experience from a development perspective. It has pushed us to revisit topics such as poverty, food security and vulnerability, on which we previously believed significant progress was being made. Instead, ironically, many economies, including Sri Lanka, are now struggling to return to pre-pandemic poverty levels in an economic context characterised by many risks and uncertainties. Given the multiple and cross-cutting economic, geopolitical, social and environmental risks that the global economy is envisaged to navigate in the next few years, we believe that the issue of vulnerability needs to be comprehensively studied so that the lessons learned from the pandemic experience can be used to address and minimise the potential negative impacts of future exogenous shocks. We anticipate that our study will contribute to and expand the growing body of empirical evidence that highlights the economic and social vulnerabilities exacerbated by the pandemic.

Quite apart from the global economic woes, the issue of vulnerability has become an increasingly important topic in Sri Lanka, amidst worsening macroeconomic conditions. This study was conceived and developed by the International Centre for Ethnic Studies (ICES) in 2020, during the first wave of the pandemic. The socioeconomic vulnerabilities that people were already grappling with at the time were further aggravated in the economic crisis that emerged in 2021, as discussed above. From 2019 to August, 2022, the share of food-insecure population rose from 9.1 percent to 37 percent (WFP, 2022). Hence, we believe that our research

findings would become even more pertinent now than when the study was initially designed.

Sri Lanka's own polycrisis situation has cracked open a small window of opportunity to reimagine vulnerability. The strong emphasis placed on strengthening the country's social protection programmes as part of the conditions of the IMF's USD 3 billion bailout package to Sri Lanka has led to an overhaul of *Samurdhi*, the national flagship poverty alleviation programme, and the introduction of a better targeted and more comprehensive welfare benefit scheme, *Aswesuma*, to replace it. It has also catalysed a renewed and more expanded focus on the poor, vulnerable and marginalised communities by international development agencies such as the World Bank, Asian Development Bank and the United Nations Development Program (UNDP). In fact, the UNDP launched a multidimensional vulnerability index in Sri Lanka, the first of its kind in March, 2023 (Oxford Poverty & Human Development Initiative [OPHI] and UNDP, 2023). Thus, we believe the timing of our study is opportune, and we anticipate that the findings can offer useful insights for informing policy design, guiding programmatic interventions, and enhancing existing social protection measures. We also expect that our findings will contribute to informing the country's development framework, fostering greater equity and inclusivity in development outcomes.

The qualitative analysis is particularly relevant to the core objective of this study, reimagining vulnerability, because its flexible methodology, compared to more rigorous quantitative analytical models, allows for a nuanced exploration of the diverse drivers of economic and social vulnerabilities. In our endeavour to go beyond a priori taxonomy, qualitative analysis offers the adaptability needed to uncover and understand emergent themes and complexities within the data.

2. Conceptual framework and methods

2.1 Introduction

The pandemic experience has clearly highlighted the importance of reevaluating traditional ideals of vulnerability. The profound disruptions and challenges wrought by the global health crisis, and the subsequent economic crisis, have made it increasingly apparent that our existing understanding of vulnerability falls short in capturing the multifaceted dimensions and the evolving nature of this concept. The long-term economic implications of the pandemic, as well as other complex and multiple risks that countries are likely to confront in the next few years, also reinforces the critical need to reconsider and reframe ‘what it means to be vulnerable’ (The Lancet, 2020).

In this chapter, we articulate the foundational framework and delve into the theoretical underpinnings that pave the way for the ensuing analysis. We further discuss the relevance of these theoretical underpinnings that would be useful to frame our data analysis, discussion, and policy considerations for a more inclusive and resilient approach to tackling ever-evolving risks.

2.2 Conceptual approach

2.2.1 Defining vulnerability

Vulnerability is a complex and elusive concept. In fact, Hurst (2008) had likened the existing definitions of vulnerability to six blind men trying to describe an elephant, each providing only partial views of the complete phenomenon. However, across the multiple fields in which the term is used, vulnerability broadly refers to the potential for negative or poor outcomes, risks and danger (Arora et al., 2015). Chambers (1989), who was one of the seminal authors on the topic, defined vulnerability as, ‘...exposure to contingencies and stress, and difficulty in coping with them’ (p. 1). He further explained that such a risk comprises an external and internal dimension. The external aspect is the shock, stress or risk an individual or a household is subject to, and the internal aspect is the defencelessness, or the inability to cope without damaging losses (Chambers, 1989). The loss could be

anything from being physically weaker and economically impoverished to socially dependent and psychologically harmed (Ibid).

From Chambers' (1989) definition of vulnerability, Watts and Bohle (1993; see also Bohle et al, 1994) identified three co-ordinates of vulnerability, namely: (i) the risk of exposure to shocks, (ii) the risk of inadequate capacities to cope with the shock, and (iii) the risk of severe consequences and the associated risk of a protracted or limited recovery from the shock. The authors also expanded upon Chambers' (1989) external-internal dichotomy of vulnerability by modelling the tripartite configurations of each of the two sides. The vulnerability space - comprising risk exposure, coping capacity and recovery potential discussed above – is configured through three distinctive causal processes: (i) entitlement; (ii) empowerment and the political economy⁴.

They produced three further analytical concepts to explain vulnerability, using the intersectionality of these dimensions: (i) economic capabilities which are shaped by entitlement and empowerment; (ii) property relations that are influenced by entitlement and political economy, and (iii) class power which is determined by political economy and empowerment. Watts and Bohle (1993) argued that these concepts reflect the terms used by Chambers (1989) in defining vulnerability and that the space of vulnerability rotates around these three axes. They theorised that the interior of the vulnerability space comprised (i) entitlement relations, (ii) power or institutional relations and (iii) social relations of production or class relations. Thus, vulnerability could be an entitlement problem, stemming from a lack of power, or due to exploitation and appropriation. Modelled this way, the interior of the vulnerability space can be traced socially (resource poor, powerless, exploited groups of individuals) and spatially (marginal, dependent and crisis-prone regions). These configurations clearly illustrate that vulnerability is “a multi-layered and multidimensional social space defined by the determinate political, economic and institutional capabilities of people in specific places at specific times” (Bohle et al., 1994, p. 39).

⁴ Bohle and colleagues (1994) presented this model using slightly different terms for entitlement and empowerment. In this study, the dimensions are labelled: (i) human economy, which refers to the individual command over resources and basic needs; (ii) expanded entitlements, or the totality of individual rights and social entitlements; and, (iii) the political economy.

Turner and colleagues (2003) expanded the vulnerability framework further by bringing up the interaction of hazards in the human-environment system on the exposure side, and adjustment and adaptation responses on the consequences side of the vulnerability space. Thus, over the years, the concept of vulnerability has grown from an intrinsic risk factor to a far more multidimensional experience rooted in economic, social, physical, environmental and institutional factors (Birkmann, 2007).

Downing (1990) made the important distinction between baseline and current vulnerability by delineating the structural and transient dimensions of the broader concept. Baseline vulnerability refers to the underlying factors that influence the likelihood of exposure to a shock, whereas current vulnerability is the magnitude of the consequences experienced in the event of a shock. Similar distinctions have also been made by Kate and Millman (1990), Bohler and colleagues (1994) and Davies (1996), separating the long-term and proximate factors that determine exposure to and consequences of shocks. Lavell (2004, cited in De León, 2006) has also made a similar distinction between exceptional vulnerability (due to exceptional events) and everyday vulnerability (due to permanent unfavourable conditions associated with the poor such as illiteracy, malnutrition, low-income, domestic violence etc.).

2.2.2 Socio-economic dimensions of vulnerability

In the development discourse, vulnerability is examined in relation to a range of stressors such as violent conflicts, natural disasters, climate change, pandemics, economic crises etc., and across various scales from individual and household levels to regional and national levels. In this study, the stressors in question are the pandemic and the economic crisis. Our focus is on how these two shocks have triggered vulnerability among the households in our sample. While the pandemic has triggered a range of vulnerabilities – encompassing economic, social, physical and psychological dimensions – across various societal groups, our primary focus is on examining the economic and social vulnerabilities experienced by the respondents and households in our sample.

Economic vulnerability is the susceptibility of a household to the adverse ramifications of external stressors which would significantly impact its economic stability and well-being. Quite often, economic vulnerability is analysed as the

risk of falling into poverty or remaining in poverty (Gallardo, 2018). The adverse outcome - poverty - is often determined using a poverty line, which can be absolute (a fixed minimum income level necessary to meet basic human needs) or relative (based on how people's income compares to others in a given economic context). An individual is considered to be income-poor if s/he falls below a specified poverty line. Determining the threshold for multidimensional poverty, which assesses poverty beyond income, is a little more complex. For example, the World Bank considers an individual to be multidimensionally poor if s/he is deprived in indicators whose weight adds up to 1/3 or more of the dimensions of its multidimensional poverty measurement (Diaz-Bonilla & Sabatino, 2022). Vulnerability to poverty is the risk of falling below the income or multi-dimensional poverty thresholds and the risk of remaining below these thresholds.

Clearly then, vulnerability is an assessment of a potential future outcome i.e., the risk of falling into poverty in the future. In other words, vulnerability is an ex-ante assessment of the well-being of an individual or household, whereas poverty is an ex-post assessment of it (Chaudhuri, 2003). Thus, while we can use relevant data to measure whether a household is currently poor or not, we cannot make that assessment about vulnerability. We can only estimate or infer from any relevant data whether a household is currently vulnerable to future poverty, but we cannot observe a household's current vulnerability levels (Ibid). Thus, poverty and vulnerability are two distinct, but highly correlated concepts, which deeply influence each other (Wisner et al., 2004; Makoka & Kaplan, 2005).

A household's vulnerability to poverty hinges on (i) the risk of exposure to adverse aggregate or idiosyncratic shocks, (ii) its ability to sustain its well-being during such shocks, and (iii) its capacity to recover from them (Chaudhuri, 2003). But an important distinction to be made is that, while vulnerability to poverty affects everyone, it poses a more serious risk to the poor and to those who are just above the poverty line (World Bank, 2001). This is because a shock that can disrupt their livelihoods and income can thrust them into further and more permanent poverty than the non-poor, for whom the impact of such shocks is likely to be more transitory. In other words, even if the magnitude of the hazard is consistent among various individuals and groups, their ability to protect themselves is influenced by distinct social, economic, and political dynamics that impact them unevenly.

Gallardo's (2018) discussion of vulnerability to poverty is quite insightful in the context of the pandemic. The author explains that classifying individuals and households for whom poverty is a certain outcome (poor in any state of nature) and for whom poverty is an expected outcome (who could be non-poor in some states of nature) as vulnerable is fairly straightforward. However, there are individuals who, though not poor, face a certain risk of falling into poverty in some states of nature. While the author recognises that it is not feasible to consider all of them who would fit into this category as vulnerable because it represents a large section of the middle class and even a portion of the rich, still underscores the importance of identifying a relevant risk threshold for this third group, on which there is no common consensus⁵. The pandemic-induced 'new poor' can be thought of as part of this third group, who, if not for this shock, would not likely have been pushed into poverty.

Social vulnerability is a more nuanced, expansive and complex concept which encompasses a combination of social, cultural, economic, political and institutional processes that influence the differential impacts of shocks (Turner et al., 2003). According to Birkmann and colleagues (2013), social dimensions of vulnerability encompass the risk of damage caused by disruption to individuals (mental and physical health) and collective social systems (health, education services, for example) and their characteristics (such as gender, age, ethno-religious identity). While there is a large body of literature that documents the social vulnerability in relation to the incidence of infections and deaths due to the COVID-19 virus (See for example, Fallah-Aliabadi et al., 2022; Kashem et al., 2021; Nayak et al., 2020; Rifat & Liu, 2022), our study deliberately refrains from extensively focusing on the health outcomes of the pandemic. This decision is rooted in ethical considerations, as we aimed to avoid placing additional stress on our respondents by asking them to recall the health impacts of the pandemic on themselves and their households.

We also came across a handful of studies that looked at social vulnerabilities in relation to livelihoods and food security (Gupta et al., 2021), household poverty (Dang et al., 2023), and a few other studies that looked at both socio-economic dimensions of vulnerability as one in order to unpack the impacts of the pandemic on households (Huynh & Bui, 2024; Khan et al., 2022). Overall, we observed that

⁵ See Gallardo (2018) for a detailed theoretical discussion of the approaches to vulnerability and poverty.

there was much less clarity on what social vulnerability constitutes, particularly in comparison to a larger literature and more specific conceptualisations of economic vulnerability. In some ways, social vulnerability shares similarities with vulnerability to non-monetary poverty, as both concepts are inherently more subjective compared to the relatively more objective nature of economic vulnerability and monetary poverty. Furthermore, we posit that a laboured effort to disentangle the intricately woven and mutually reinforcing economic and social dimensions of vulnerability is rather counterproductive. Such an effort could potentially yield a biased depiction of vulnerability, as opposed to a comprehensive analysis of vulnerability in its full form, that encompasses both social and economic dimensions.

2.2.3 Analytical framework

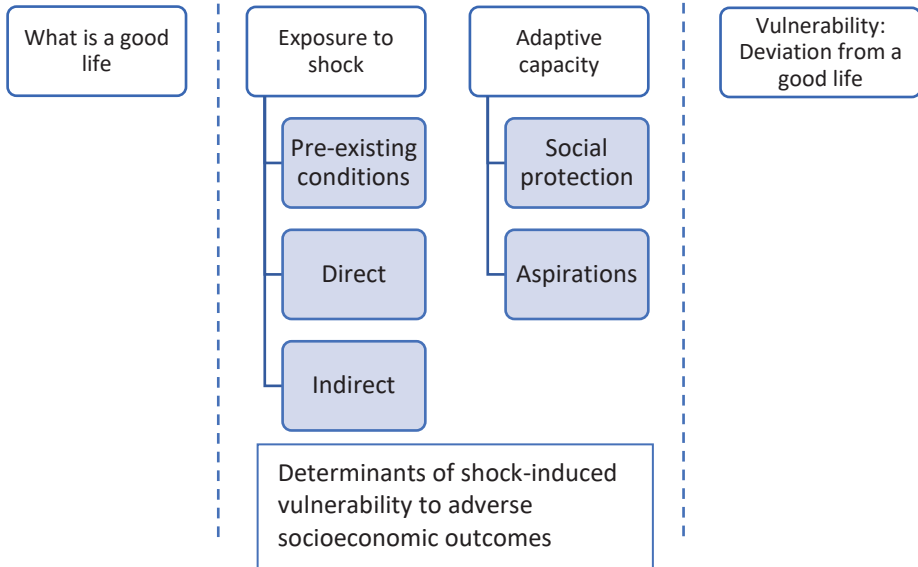
From the preceding literature review, we can describe vulnerability as the risk of experiencing a negative outcome resulting from the interaction of three elements in the event of a shock: exposure to, impact of, and the capacity to recover from the shock. We recognise from the literature that these elements often overlap and intersect in the ways in which they influence how an individual or a household is affected by a shock. Therefore, our analysis will attempt to understand not only the exposure, sensitivity and adaptive capacity of respondents and their households in the face of the pandemic as separate elements, but also how these interact to reinforce or negate the impacts of each other in creating respondents' vulnerability experiences.

In contrast to the contoured and stringent definitions employed in our quantitative research study, we attempt to embrace a more open and loosely defined concept of vulnerability in our approach to our qualitative data. This allows us to keep true to our attempt to look at vulnerability from a broader, less-constrictive perspective as proposed in *The Lancet* (2020). Vulnerability is loosely considered as risk of experiencing negative economic outcomes (such as income and livelihood losses) and social outcomes (impacts on physical and psychological health, education, social interactions). While this does not imply a departure from the fundamental elements of vulnerability, we believe that adopting a more flexible and under-defined framework enables us to approach the concept from the perspective of the respondents, rather than imposing our preconceived notions on it (Chambers, 1989).

In our attempt to confront traditional concepts of vulnerability, in our interviews we intentionally refrained from gathering information from the respondents about household income or expenses, which are traditionally used to assess household economic vulnerability. Instead, we were keen to examine the economic and social experiences of the respondents prior to, in the midst of, and in the aftermath of the pandemic to delineate drivers of vulnerability, through increased exposure and sensitivity and/or reduced adaptive capacity.

To do so, we encouraged respondents to define what they conceived to be a good life so that we could examine what were the drivers of vulnerability that kept them from enjoying their conceptualisation of a good life. These drivers could be both pre-existing conditions or those that were the result of the pandemic and/or the economic crisis. In effect, we attempted to not just delineate immediate impacts of the external shocks, but also to unpack how pre-existing conditions have exacerbated or cushioned their exposure to the impact. The impacts of the shocks were further disaggregated as direct and indirect, although we understood that the demarcation might be fuzzier in the respondents' lived experiences than we imagined. We also explored respondents' personal coping mechanisms in the face of the exogenous shocks, and respondents' perceived impact of the health initiatives and social protection programmes initiated by the government and other organisations. Additionally, we asked respondents about their future aspirations in order to understand their mindset about recovering from the pandemic and the economic crisis. This framework (Figure 1) served as our guide for reading and analysing the interviews.

Figure 1: Analytical framework for qualitative data analysis



Source: Author

2.3 Research methods

2.3.1 Respondent selection

This study analyses transcripts of 72 in-depth interviews with respondents from Colombo, Matara, Kilinochchi, Kurunegala, Badulla and Trincomalee districts. These districts represent, respectively, the worst, moderately and the least affected by the COVID-19 pandemic, as reflected in the number of reported confirmed cases. In order to capture the complex and nuanced experiences of vulnerability, the respondent selection followed a purposive sampling approach based on their demographic, economic, household and spatial characteristics. A total of 12 in-depth interviews were conducted per district. As the pandemic's impacts were predominantly diffused through labour market mechanisms (Gunatilaka & Chandrasiri, 2022), we paid attention to the livelihoods and economic sectors respondents were engaged in, and included a variety of waged and own-account employment as well as a few economically inactive respondents. Generally, three female and three male respondents were selected from 2 *Grama Niladhari* (GN) divisions in each district, except in two districts where we selected transgender

individuals for the discussion. To capture a cross-section of the age groups at risk, we picked respondents who were young adults (aged 19-25 years), middle-aged and senior citizens (60+ years), with at least one young adult and one senior citizen from each district. In addition, we included other potentially at-risk persons such as those with disabilities and women heading their households. Table 1 below presents the purposive sampling framework.

Table 1: Summary overview of respondents

| | Skilled emp. | Agri. livelihoods | Self-emp./ Small business | Temp./ Casual labour | Migrant workers | Unemp. / Inactive |
|--------------------|--------------|-------------------|---------------------------|----------------------|-----------------|-------------------|
| Colombo | | | | | | |
| Male | 1 | 0 | 1 | 2 | 0 | 1 |
| Female | 2 | 0 | 1 | 1 | 0 | 2 |
| Transgender | 0 | 0 | 0 | 1 | 0 | 0 |
| Badulla | | | | | | |
| Male | 1 | 3 | 2 | 0 | 0 | 0 |
| Female | 2 | 2 | 1 | 1 | 0 | 0 |
| Matara | | | | | | |
| Male | 2 | 2 | 1 | 1 | 0 | 0 |
| Female | 3 | 0 | 1 | 1 | 0 | 1 |
| Kilinochchi | | | | | | |
| Male | 2 | 2 | 1 | 1 | 0 | 0 |
| Female | 2 | 1 | 1 | 1 | 0 | 1 |
| Trincomalee | | | | | | |
| Male | 0 | 2 | 1 | 1 | 1 | 0 |
| Female | 2 | 0 | 1 | 2 | 1 | 0 |
| Transgender | 0 | 0 | 0 | 1 | 0 | 0 |
| Kurunegala | | | | | | |
| Male | 1 | 2 | 1 | 2 | 0 | 0 |
| Female | 2 | 1 | 1 | 2 | 0 | 0 |

Source: Author

2.3.2 Interview guide and data

For the in-depth interviews, a semi-structured interview guide was prepared and this underwent several rounds of reviews internally and was vetted by an Ethical Review Committee (ERC) appointed for the project by the ICES. The interview guide was informed by a literature review conducted as part of this study, as well as a broader review of literature on the concept of vulnerability. The final interview guide cleared by the ERC was translated into local languages. Six researchers were trained in a two-day workshop on qualitative data collection methods, following which they went out to the field to carry out the in-depth interviews. The interviews were conducted in local languages, at respondents' homes, and these were then transcribed and translated into English. The data collection took place over a period of six months from December, 2022 to June, 2023 by the six researchers. The soft copies of the interviews are saved in a password protected folder, with access only to the members of the qualitative research team at ICES. The anonymised interviews will be archived in the ICES database once all analytical work based on the qualitative data is completed by the ICES research team.

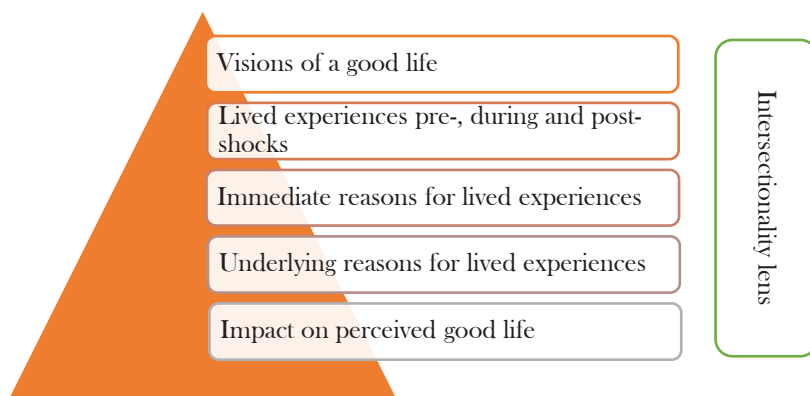
2.3.3 Analysis

We followed a thematic analysis approach in examining our interview transcripts. We commend our six researchers for carrying out much of the data compilation process, as well as conducting the interviews in local languages and transcribing and translating them into English. Data dissembling was an iterative process, which comprised several rounds of data dissection and coding and categorisations. This raw open coding phase exhausted key words, phrases and sentences respondents used to describe their version of a good life as well as their current situation. We also examined and coded words, phrases and sentences respondents used to describe their lives before, during and after the pandemic. We tentatively labelled this analytical segment as perception coding, reflecting respondents' subjective interpretation of their lived experiences.

The first round of data dissection was followed by a process of axial coding to identify words, terms and phrases that underpinned, explained or expanded these perception codes. We also paid particular attention to words and phrases that were indicative of gradations of the shock experiences. This preliminary analysis

was then used as a guide of sorts to parse from the interviews the respondents' own and their household experiences that support and even contradict their lived experiences. In other words, we looked at the reasons why households experienced what they did during the two shocks in question, with a specific focus on real and perceived impacts. We followed a causal axial coding process, differentiating between impacts experienced by respondents and households (what happened) and their coping strategies (what they did and continue to do) in the face of such experiences. We also followed an intersectionality approach (Crenshaw, 1989) across the data coding process to unpack the differences in experiences altogether, and potential variations in similar experiences among households depending on respondents' own and their households' characteristics.

Figure 2: Overview of data coding process



Source: Author

Following Gunasekera and colleagues (Forthcoming), we refrain from quantifying the responses due to the purposive nature and small size of the qualitative sample, which limits its ability to provide a generalisable picture. Instead, we use terms such as 'most', 'many', 'several', 'few' and 'handful' to convey a sense of the frequency of the responses in a none-to-all continuum. We expect these terms to provide the reader with some indication of how common or rare a specific experience is in our purposive sample.

2.3.4 Limitations

Before proceeding, we outline a few study limitations for the reader's consideration. The first is the limited geographic coverage. Although the pandemic and the economic crisis affected all parts of the country, we have conducted in-depth interviews with respondents from only 6 selected districts. Drivers of vulnerability among people in the other districts could have been different to what we found in our data. In addition, the district selection for this study was informed by the severity of the health impact of the pandemic, proxied by the number of confirmed cases across the country. However, the subsequent economic crisis might have had different impacts spatially. Secondly, while we considered a range of employment types and economic sectors in our respondent selection criteria, there may have been other employment arrangements that were significantly impacted by the pandemic, which we did not include. Thirdly, although I have conducted the data analysis, I was not involved in conducting the actual interviews. The loss of context, therefore, might have resulted in a limited understanding of the participants' use of nuance and idioms in local languages, as well as their emotions. Next, this qualitative study is presented independent of the quantitative study investigating the same topic, and we do not contextualise the findings from the quantitative study here. However, a synthesis paper will be prepared to bring together the findings of both components for a more comprehensive analysis as part of the broader project outcomes. Finally, as is typically the case with any qualitative analysis, the findings emerging from the study are context specific and cannot be generalised to the population at large.

3. Analysis

3.1 Vulnerability as a risk of deviation from a good life

As established in the preceding chapter, vulnerability is a relative concept and is only useful in the context of an agreed upon outcome, such as poverty, malnutrition, disasters or illness. These outcomes are often exogenously determined thresholds such as poverty lines, asset indices, or calories consumed (García et al., 2018). While these objective cutoffs have an intuitive appeal from a policy perspective, one cannot ignore that, in its broadest sense, vulnerability, at least in its subjective form, is a deviation from a person's own ideals of what a good life is for them.

3.1.1 Constituents of a good life

An analysis of the respondents' idea of a good life clearly shows that, while there are common characteristics of what they think of as one, there are also considerable nuances which play a deterministic role in their own perceived economic and social vulnerability. For a large majority of respondents, having enough money is important to lead a good life. As to how much is enough appears to largely depend on their aspirations, expectations, financial obligations and for a handful, the need for external validation. For example, for many respondents having money to purchase goods and services their households need is key to a good life. The inability to do so is a source of emotional distress for them, and therefore a deviation from their perceived good life. For the large majority of respondents across all districts, having enough money is essential to solve their economic problems and to be free of psychological stress. Conspicuously, however, none of the respondents refer to being rich, wealthy or financially affluent as a perception of a good life. Instead, the common theme permeating nearly all respondents' ideas of a good life is having economic conditions adequate to meet their household needs and for much fewer respondents, their wants.

A good education, a house of one's own, a well-paying, permanent job or livelihood are also important for many respondents to lead a good life, which are sources or manifestations of having enough money. For a handful of respondents, the idea of a good life also includes owning a good vehicle. Only one male respondent spoke

of having land as a part of having a good life. For a few respondents, the respect of their community or neighbours is also an indication of a good life. Curiously, only one respondent from Colombo considers having adequate savings to be an important factor of having a good life. Only two respondents from the Northern and Eastern provinces mentioned being free of debt as an indication of a good life.

Beyond economic factors, a happy marriage, a home free of violence, good relations with relatives and neighbours, good friends, a violence-free neighbourhood, good physical and mental health also feature frequently in respondents' views of a good life. Only two respondents, one male and one female, defined a good life in a way that alluded to empowerment – doing what one loves, and having the freedom to do what one wants. On the other hand, a handful of respondents pointed to not having to depend on others for help as important for living a good life. We also observed that for some respondents, some parts of what constitutes a good life is informed by religious values. For example, a few respondents spoke of living according to one's conscience, leading a religious life, having inner peace, and contentment with what one has as part of their ideals of a good life.

While the definitions of what a good life is tends to vary across a vast spectrum, from being able to afford three meals a day and being able to buy what the household needs, to having lots of money, land, vehicles, good jobs and houses, there are telling gendered differences in how a good life is perceived. Among most male respondents, financial factors, especially money, feature prominently in what constitutes a good life, although there is recognition that having money alone cannot create one. A handful of male respondents also pointed to the ability to give their children a better life as an indication of a good life. More female than male respondents highlighted the importance of living harmoniously with family, relatives and neighbours, a happy marriage and a home free of violence, good physical and mental health, and freedom as constituents of a good life.

It is also clear that life experiences seem to significantly influence some of the respondents' perceptions of a good life. For example, one transgender male respondent from Colombo defined a good life as one that can withstand the criticism and challenges that come from society. Curiously, he did not speak of financial or any of the other non-financial factors that other respondents identified as key constituents of a good life.

“A good life is about developing the ability to face the challenges that come our way. Society criticizes us in many ways. It criticizes many things like the clothes we wear, the way we talk, our education, our profession. Many of us identify flaws. Thus, we must develop the courage to face the criticisms and challenges that come our way. With this we can overcome any problem and succeed in life. In life we should not depend on anyone and stand on our own feet. This is the good life as far as I am concerned.” (Unemployed transgender male, aged 35, Colombo)

Similarly, a widowed female respondent from Jaffna spoke only of freedom and independence as characteristics of a good life. A married female Tamil respondent from Jaffna spoke extensively of the freedom she had within the marriage to do what she wanted and how it had created a good life for her.

Thus, a good life is very much a subjective notion that is informed by intersecting socioeconomic conditions, social, cultural and religious values, and life experiences. For the most part, however, we can delineate broad characteristics of what a good life is for the large majority of respondents; for most respondents, an adequate income to meet basic household necessities appears to be the basic threshold of a good life. The importance of income security is reflected in how respondents have underscored having a well-paying or permanent job, a good livelihood, and a good education as constituents of a good life. In terms of asset ownership, most respondents consider having their own home as important, but there is hardly any mention of savings, investments, land ownership etc. Only a few respondents speak of owning a vehicle as a sign of a good life. In the meso environment, safety and security in the house, neighbourhood and community are recurrent themes emerging as important for one to have a good life.

3.1.2 Deterrents of a good life

The question of whether respondents believed they had a good life now or not resulted in what might be called split opinions. At least half of the respondents believed they had a good life, an outcome that was somewhat opposed to what was expected. The reasons for their justifications varied widely, however. Most

perceptions of respondents who believed they were able to live their interpretation of a good life were rooted in them having a strong economic situation – such as a good education, permanent employment, adequate income, own home, the absence of financial obligations etc. A few respondents also pointed out that they lived within their means and, as a result, even in the midst of financial difficulties, they were happy. These respondents also spoke of other catalytical factors such as having a happy marriage, children who were doing well at school, good health, good relations and financial support from parents and siblings etc.

“I have a good life, since I do not have any loans, and I have beautiful family. What else do we need to have for a good life? Almighty God provides everything at the perfect time.” (Male marketing employee, aged 44, Trincomalee)

I am so happy about having a good life, because I have a good job, and income, a good husband, good son, and a beautiful home and also, I have respect from the society. (Female teacher, aged 32, Matara)

The ability to do what they enjoy was also a catalyst for a small number of respondents, especially female and transgender respondents.

“I have financial problems in many ways. However, I have the freedom to do what I like. My husband does not block anything. There is a good understanding and trust between my husband and myself. Despite financial problems, our family has good relations. I know how to live with what I have. I am happy.” (Female cleaning lady, aged 41, Colombo)

“But with the help of many friends, today I am helping people in my favorite profession. Now I have a career. Salary is there. There is hope and courage in my heart. So now I think I have a good life.” (Transgender male activist and makeup artist, aged 35, Colombo)

A handful of respondents had a religious or philosophical perspective on life about being content with what one had, and on not competing with others, in order to

live a good life. We observed however, that the few respondents who have adopted such a perspective on life also have comparatively higher educational levels and are engaged in formal employment.

“I am living a good life because I have found inner peace. The level of job-related stress also hinges on how we manage it. (Male Public Health Inspector, aged 33, Kilinochchi)

“I have a considerably comfortable life and mental freedom. I engage in religious activities as I can. I am content with what I have, so I am satisfied about my life so far.” (Female teacher, aged 61, Kurunegala).

Among those who believed that they were currently not having a good life, the lack of financial stability or not having enough money, appears as a recurrent theme that deters respondents from experiencing one. Most respondents face economic distress due to various reasons. For many respondents working casual or daily-paid jobs, the lack of a permanent source of income is a cause for worry and uncertainty about being able to meet their basic household expenses. Most daily labourers do not appear to have as much work now [at the time of the interviews] compared to a few years ago. A handful of respondents pointed out that they were unable to go to work daily due to their chronic health conditions such as asthma, body aches, and cardiac conditions. Many of these respondents are either self-employed, owners of micro enterprises or work as daily wage earners in agriculture or small businesses.

“It’s a dream for us to have a good life. I am a daily wage worker that works for hire. Even if we eat today, we don’t know how to get tomorrow’s meals. It is very difficult to give an education for our children.” (Male casual labourer, aged 41, Matara)

“I do not think that I have a good life because I do not have a permanent income earning source. I always think and worry about my family; I am the one who has to look after my wife and three children. If I could work in a permanent job I would not worry about tomorrow and I would live my life happily.” (Male fisherman, aged 28, Trincomalee)

“We are struggling to achieve a good life, because I don’t have a permanent income. My life is full of problems and responsibilities.”
(Female salon assistant, aged 25, Kurunegala)

A few respondents had experienced job losses due to the pandemic, thereby losing their income sources. The death and disability of primary income earners had also contributed to economic hardships among two households. Farmers and agriculture sector workers also spoke of the income losses due to the shift to organic fertilizer and the sharp increase in the prices of imported fertilizer. More importantly, however, they pointed out that farming had always been an unprofitable livelihood where incomes had always been uncertain.

The high prices of goods, especially food items and school supplies, adds to most respondents’ economic distress, even if they earn consistent income levels. The erosion of the real value of money and the ensuing difficulty in making ends meet come up more consistently in the conversations with women than with men, alluding to the emotional stress they might be undergoing as they struggle to feed their families and teach their children.

“We are struggling to survive. We cannot afford the price of the goods and services. I cannot buy even food for the month how much I earn. So, I think I don’t have good life. The majority of the Sri Lankans cannot eat three meals a day.” (Male technical assistant at a telecommunication company, aged, 42, Kuliypitiya)

“As a single mother, I used to be able to afford my children’s expenses and food expenses. But now, I am facing economic difficulties. I think the reason is the increasing price of goods and services. I don’t think now I am having a good life because I can’t live with my earnings and I have loans to settle. So, there is no mental freedom.” (Female beautician, aged 32, Nikaweratiya)

“...we are suffering for everything; we can’t buy what we want because we don’t have enough salary. Our earnings are not enough for our expenses, then how can we fulfill our desires?” (Female tea factory worker, aged 54, Badulla)

Beyond economic distress, health issues also contribute to a deviation from living a good life among a handful of respondents. In addition to limiting income-earning opportunities, illness and disability are also a source of psychosocial distress among a limited number of respondents.

“I have been affected by illness and disability, which has made me feel unhappy. It’s disheartening when others refer to me as disabled, including my grandchildren and children, without consideration or respect. The activities of my children and other people have contributed to my depression.” (Female, unemployed, aged 65, Kilinochchi)

A few women spoke of their spouses’ alcoholism as a challenge to having a good life. On the one hand, because of excessive drinking, men miss out on the number of days they can actually work. As a result, alcoholism has a direct negative impact on household income. Given that alcoholism is predominantly reported from households whose main income comes from daily wage work and are therefore already income-vulnerable as discussed earlier, the lost income due to missed days of work further exacerbates the financial stress of these households. Additionally, these women explained that their husbands also spent a lot of the income they earned on alcohol, leaving very little to spend on household necessities. The negative impact of alcoholism on children’s well-being and women’s happiness underscores the psychosocial stress experienced by household members.

“I married 20 years ago; I have not lived happily all these years. I was the one who chose him as a life partner. Because of that I have been facing these struggles. He does not go to work regularly; he goes twice a week and he gets 2,500 rupees a day. He gives me 500 rupees for family and uses the balance to drink alcohol. After he drinks alcohol, he starts arguments and he has beat me many times. I started working after my children were born and I am now taking care of my children and my husband; I cook meals and buy other essentials. My husband has not given even a meal to me even once.” (Female housemaid, aged 38, Trincomalee)

“I don’t have a good life. My husband drinks a lot, he spends everything he earns on drinking. He disturbs us a lot every day. My children are

also very scared of him. I am unable to live happily. I have to spend my salary on our house needs.” (Female labourer, aged 37, Matara)

Discrimination stemming from diverse sexual orientations, gender identities and ethnoreligious identities also act as barriers to enjoying a good life for some respondents. One respondent who identifies as gay discussed his vulnerability to abuse and discrimination if people identified his sexual preferences. He described how he had limited social connections in order to protect his sexual identity.

“I live a kind of an isolated life Before they [others] excluded me, I isolated myself and living my life freely. I only talk to my family, and not to my relatives. At work, I do not talk to other employees. I only talk to the shop owner... because if others figure out our secret, they spread the news [that I am gay].” (Male undergraduate and part-time shop keeper, aged 27, Trincomalee)

The transgender male respondent appears to live an even more isolated life. He explained:

“As you may know, we are excluded from the community. There is no home for us and family members also refuse to keep us with them because of their family status.... We have lost our personal satisfaction and happiness because of gender issues and we are always excluded from the society and the community. Many people feel ashamed to move with us. Even when we ask for a small help, they refused to do that. We have become familiar with these issues.” (Transgender sales assistant, aged 32, Trincomalee).

Respondents of Indian Tamil origin spoke of the lack of rights which have long prevented their community from being accepted by society, and how such discrimination has deterred them from having a good life.

“Still as Indian Tamils we have to fight for everything, for our rights, our freedom, even for our salary. Many places in this country treat us like slaves. No one cares about us and everyone talks about our

problems only during election time. After that they forget us.” (Female plantation sector worker, aged 60, Badulla)

Thus, by and large, economic factors play an important role in whether respondents consider themselves to be leading a good life or not. However, it is also clear that other non-economic factors have a significant impact on whether people are able to live their definition of a good life. Furthermore, it is clear that it is at the intersection of economic and non-economic challenges that respondents feel the most vulnerable. Even in the midst of financial constraints, good intimate partner relationships and strong familial connections appear to help respondents live a good life, while good financial conditions do not necessarily always result in a good life in the midst of loss and death.

If we were to think of vulnerability as the risk of not being able to live one’s perceived good life, or being forced into or further thrust into a life that one does not consider to be a good life, we clearly see from the discussion above that, being vulnerable is a complex situation which affects households even of similar economic conditions vastly differently. While some of the deterrents we have identified are outright drivers of economic vulnerability, some of the other factors, such as domestic abuse, psychosocial stress, loss of loved ones, isolation, exclusion and systematic discrimination tend to have more far-reaching and long-lasting economic and non-economic disempowering effects on individuals and households.

3.2 Pandemic and its impact on household vulnerability

3.2.1 Pre-existing conditions

All but four respondents in the sample pointed out that they enjoyed a better overall financial situation before the pandemic broke out. Within this sub-sample, we identified two distinct narratives in relation to the pre-pandemic household financial situation. The first is of a surplus income, although this emerged only in a much smaller number of interviews in the sample. Several respondents pointed out that they were financially quite well off before the pandemic, and had the means to help others as well. Some of them had opportunities to earn extra income from second jobs. Those engaged in seasonal businesses, such as tourism and clothing,

were able to earn extra income in peak months, which they could then use to smooth consumption during the off-season.

Most respondents who either had surplus or adequate income spoke of having savings, not having taken any loans, being able to go out to eat and purchase non-essential food items, prior to the pandemic.

“My husband and I both earned. So, we could manage our expenses and we also managed to help some students who were studying in the university. We didn’t have any financial problems before the pandemic.”
(Female trader, aged 71, Badulla)

“I was abroad before COVID. My family was in Sri Lanka. I had work and I worked well. I sent money home. We saved and bought land and built a house. Financially, life was good. There was enough money to meet the needs. I come home from abroad once a year. This is a very happy period for us. We would go on family trips. Life was great.” (Male small business owner, aged 59, Colombo)

“Our pre-COVID financial situation was good. I had a job, so I had enough income. Even though I didn’t have a lot of money, my wife and children had everything to meet their needs. There was no debt. I bought all the necessary things for the house. My wife never spends unnecessarily. There were savings in the children’s bank accounts.”
(Male employee at courier service company, aged 49, Colombo)

The second narrative was one of adequate income or that they were able to manage their expenses with their income then as opposed to now, even though the level of income has remained by and large unchanged from pre-pandemic times. In other words, they referred to the higher purchasing power of their incomes due to the lower prices of basic necessities prior to the pandemic. Thus, the common theme permeating the responses from this sub-group of respondents is that, although their household incomes may not have been high, permanent or predictable, they were able to meet their expenses with what they earned.

Of the four respondents who did not perceive their pre-pandemic financial situation to be any stronger before the outbreak of the pandemic two were tea pluckers from the Badulla district, and two were daily wage labourers from the Matara district.

“Before the pandemic also, our financial status was not good. We just received 700 rupees a day. That is not enough to fulfill our needs.”
(Male tea plucker, aged 52, Badulla)

“Our economic conditions were not good even before the pandemic. Before, they paid us just 700 rupees a day in the estate, and that too only if we plucked 18 kilos of tea leaves. Otherwise, we were paid just 500 rupees a day. On average, my husband and I earned 25,000 rupees or 30,000 rupees a month. We had to manage all our expenses with this income. After our son went to work, he also gave some money for household expenses and it made things somewhat manageable.”
(Female tea plucker, aged 60, Badulla)

“We were having a difficult life even before COVID. My husband is wasting his income on alcohol. I had to spend my income on our house needs.” (Female labourer, aged 37, Matara)

“Even before COVID, we were living a very hard life. I barely ate enough food every day in order to be able to support my children’s expenses. There is nothing I can do. I always owe someone.” (Male labourer, aged 41, Matara)

Clearly, these four households are likely to be among the most chronically income poor and display characteristics that are by and large associated with chronic poverty. Three of the four respondents have only had a primary education, which likely led to the informal and low-paid wage work that they are currently engaged in. Indebtedness (Ogawa & Wan, 2007) and alcoholism (Lawson et al., 2006; Mien & Said, 2018) appear to further reduce the amount of disposable income available to the household. Only one of the four respondents has completed the GCE Ordinary Level. However, both the respondent and his wife, who has also completed the GCE Ordinary Level, are tea pluckers, alluding to a possible lack of suitable employment opportunities in the estate sector for those with relatively higher educational

outcomes. This stands to reason given that the estate sector is the poorest part of the country (DCS, 2022). They also spoke of systemic discrimination that they faced continually, underscoring the systemic challenges in the estate sector that keep households trapped in poverty for long.

“... still as Indian Tamils we have to fight for everything, for our rights, our freedom, even for our salary. Many places in this country treat us like slaves. No one cares about us and everyone talks about our problems only during elections times. After that they forget us.” (Female tea plucker, aged 60, Badulla)

“Moreover, we still struggle to get our basic rights in the country. We are still recognized as Indian Tamil. That has to change and we have to be treated as Sri Lankan.” (Female tea plucker, aged 54, Badulla)

In terms of the pre-pandemic non-financial conditions, the common theme permeating most accounts relate to greater overall happiness and freedom they enjoyed, albeit for different reasons. Most respondents across all six districts believed they were happier before the pandemic. Some of them attributed this happiness to the ability to travel and visit family and relatives as and when they wished, the freedom of mobility, and the ability to afford to go to festivals, family functions and religious events. Many respondents were also happy about their children’s education. A large number of respondents also pointed out that they were happy because they could afford to live on their income and buy the things they wanted.

“We had a close relationship with relatives and friends. We met often and attended wedding ceremonies, birthday parties, went on trips. Life was happy.” (Male farmer, aged 63, Badulla)

“I had a good personal satisfaction about my life and my children’s life. We attended special occasions of family and friends. I could give my children a good education and they also learnt really well. They were really good growing up.” (Female teacher, aged 61, Kurunegala)

Several health sector workers spoke of how much less intense work was before the outbreak of the pandemic. A handful of respondents spoke of the peace of mind they enjoyed before the pandemic, because they did not have to rely on financial support from extended family or friends to make ends meet. Most respondents also had no major health concerns, and those who had health problems were able to manage them with regular visits to doctors and medication.

A few respondents who did not consider themselves to be happy before the pandemic had valid reasons to feel so. Many of them were grappling with the loss of family members. While the unhappiness appeared to be particularly intense where the breadwinner was deceased, mainly due to the financial burden placed on the household, the ability to alleviate this pressure appears to have helped the emotional well-being of some respondents. For example, one female respondent pointed out that the savings her husband had built up when he was alive had helped her finance the children's education and, despite the sadness of the loss of her husband, she had found happiness in being able to give the children a good education. On the other hand, even where respondents were financially secure, the loss of family has had a profoundly negative impact on respondents' happiness. For example, one respondent who had lost both daughters in the 2004 tsunami disaster spoke of her long-vanished happiness.

“Happiness is far away from us. Since the day we lost our two daughters, we have no joy in our hearts. We are making up our minds through religious devotional activities. (Female business owner, aged 71, Matara)

Another respondent who had lost both her sons and her arm in the war shared similar sentiments.

“I've experienced no happiness. My happiness was shattered when I lost my hand during the war, and I also lost two sons in the same conflict.” (Unemployed female, aged 65, Jaffna)

A handful of women who were in abusive marriages or lived with alcoholic husbands spoke of being unhappy and discontent long before the pandemic. On the one hand,

alcoholism adds to the household economic distress, and on the other hand, it puts in jeopardy their physical and psychosocial well-being.

“I don’t even remember a day when I was happy. There is always a problem because of my husband’s drunkenness.” (Female labourer, aged 37, Matara)

“After he drinks alcohol, he starts arguments. He has beaten me many times. I started to work after my children were born and now I am taking care of my children and my husband. I cook their meals and buy them essentials. My husband has not given even one meal. I have not known happiness from the time I got married. I lost my parents when I was 17 and I chose this life. My husband has no respect for me, he does not listen to me. He does not earn properly for the family. Throughout my life, I have been facing these issues.” (Female domestic worker, aged 38, Trincomalee)

Two respondents in the sample discussed how social stigma and discrimination by family and community due to their gender identities and sexual orientations had affected their happiness, even when they were not necessarily income poor. Having to guard their sexual identities, the fear of harassment from friends, neighbours and co-workers, the rejection from parents, siblings and relatives, and the need to distance themselves from loved ones to protect them from stigma by association (van der Sanden et al., 2016) all played a role in putting a strain on the happiness and emotional well-being of these respondents.

“I don’t have a relationship with my family. We lost our personal satisfaction and happiness because of gender issues. We were always excluded from the society and the community. Many people feel ashamed to be around us. Even when we ask for a small help, they refuse. We have become familiar with these issues.” (Transgender sales assistant, aged 32, Trincomalee)

“There is no such thing as happiness in my life because I was born like this. I do not talk with anyone in my workplace, except my shop owner. Since it is a big shopping complex, people do not identify me by my

gender. I do not want to disturb my family and their lives by being with them. If I live with them, neighbours talk badly about my family so I have distanced myself from them and live alone in Colombo. My family only helps me financially. I do not talk with any of our relations other than my parents.” (Male undergraduate and part-time shopkeeper, aged 27, Trincomalee)

Thus, the pre-existing conditions, as reflected in the recollections of their perceived financial and non-financial conditions prior to the outbreak of the pandemic, present a nuanced picture. By and large, respondents consider the pre-pandemic years to have been financially more manageable, not necessarily because they had a sizeable income, but predominantly because what they earned was enough to purchase their necessities. They also allude to the stability and predictability of what they can do and buy with their income, prior to the pandemic, even in situations where there were financial challenges.

We also observe that drivers of chronic poverty conditions have kept a handful of households in economic distress for long periods of time, and their income poverty conditions are further aggravated by systemic weaknesses that long predates the pandemic. In terms of non-income pre-existing conditions, most respondents have quite positive recollections about their happiness and social networks. But we also suspect that many of these responses might suffer from recollection biases, as they might have exaggerated their happy memories of what was, given the challenges that have unfolded since the breakout of the pandemic. Some responses such as “we were so happy before the pandemic”, “everything was perfect”, and “I was happy all the time” corroborate our concerns. However, overall, we are able to tease out a general consensus among respondents of being able to live a “normal life”, “manage children’s needs” and enjoy a “normal economic situation” prior to the pandemic.

3.2.2 Health impact of the pandemic

We observe two distinct parts to the complex and layered overall impact of the pandemic on respondents. The first is related to the health aspect of the pandemic, and the second, its economic effects. We further observe direct and indirect bearings of both these impacts on respondents, although we notice some variation

in the intensity of these impacts across districts, the age, gender and employment of the respondents and other household experiences, including idiosyncratic shocks they have experienced before or during the overarching covariate shock of the pandemic.

We trace three distinct direct impacts of the health dimension of the pandemic – the fear of the disease, the physical experiences of contracting the virus, and the emotional stress of dealing with contracting the virus. A large majority of the respondents across all districts felt fear – of the disease, of the quarantine process, and of isolation and lockdowns. For most respondents this sense of fear and vulnerability stemmed from not know anything about the virus, especially at the very outset. One female respondent from Badulla (a nursery school teacher, aged 31) likened her experience of the first wave of the pandemic to being blindfolded and left in the forest. As people started dying of the virus, many respondents became nervous and worried about their own health and that of their loved ones.

“In my lifetime, I had never faced such an experience. We were scared because of this disease. No one knew about it and how it spread. Even doctors did not have any idea about this disease and there was no medicine for it.” (Female tea factory worker, aged 54, Badulla)

“COVID was new to everyone and we did not know anything about it. It felt like being blindfolded and left in the forest. There was a fear about everything. We were scared whether we were infected with COVID even if we had a headache or cough. So, the early stage of the pandemic outbreak was very scary but after some months it became normal.” (Female nursery school teacher, aged 31, Badulla)

“We did not have any awareness about COVID in the beginning. So, due to the symptoms we had, our fear about our lives was very high and it took its toll on us mentally. (Female tutor, aged 21, Colombo)

The fear of contracting the virus was particularly pronounced among those who were older, had health concerns prior to the pandemic, and health sector workers. All health sector workers we interviewed spoke of the profound emotional strain they were under, not only from concerns about contracting the virus themselves,

as they treated infected patients, but also anxiety about passing it on to family members, especially their children, as well as the discrimination they faced in their communities due to their employment, echoing similar accounts of vulnerability reported elsewhere (Franklin & Gkiouleka, 2021; Newman et al., 2022; Sakib et al., 2023). At the same time, the tense and difficult conditions under which they had to work, with limited leave and breaks, and having to wear protective but uncomfortable equipment for long hours further worsened the emotional stress and uncertainty of health sector workers, while also affecting their physical health.

“Before, I worked in the normal ward. After the pandemic, I was allocated to a COVID ward. So, I didn’t have leave on those days. I had to work continuously because of staff shortages. Some days, after night duty, I had to work on the next day too. It gets stressful. Also, we had to wear personal protective equipment for a long time in the ward. It was hot and I was sweating a lot inside. So, we get headaches very easily, and suffered while we were on duty.” (Male nurse, aged 40, Badulla)

“I was doing my duties with great fear because there were two small children at home, so I had to be very careful. The risk of COVID was high in my job because we always had to deal with the outside society. When we work with pregnant mothers who are at the highest risk, their safety is very important and we often had to wear protective clothing while on duty, and it was very difficult and uncomfortable.” (Female public health midwife, aged 37, Matara)

“My wife and I both work in healthcare. The pandemic affected us in every way. We had to work with great fear because we did not know when we would be infected by the disease. The biggest problem was going home after work and doing housework and children’s work. I had to limit my contact with them a lot. It was mentally painful. Also, because we were engaged in a risky job, the society seemed to be somewhat reluctant to have contact with us. They were afraid that we would spread the disease. We were restricted from visiting friends and relatives and they were restricted from visiting us.” (Male nurse, aged 40, Matara)

But some respondents pointed out that this initial fear gradually subsided as the novelty of the virus wore off. Furthermore, most households appear to have taken proactive measures to not get infected by limiting interactions with neighbours, not allowing outsiders into the house, drinking boiled water, eating healthy, eating citrus fruits such as oranges and lime, drinking herbal remedies such as coriander and tree turmeric, and through regular steam inhalation.

We posit that these safeguards adopted by households to fight the virus are intrinsically linked with the above-average health-seeking behaviours and practices among Sri Lankans, especially women, compared to their regional peers, which is attributed to universal access to education and healthcare (Karunathilake, 2012; Smith, 2018; WHO, 2019). In fact, we argue that these behaviours serve to exemplify the ways in which, albeit flawed, in principle, inclusive and equitable policy measures have played a role in enhancing resilience to and mitigating vulnerabilities of the pandemic's health impact.

The second direct health impact is contracting the virus and the complications associated with it. Only a small proportion of respondents or their household members had contracted the virus, which might be at least in part attributed to the proactive measures most respondents had taken to protect themselves and their households from catching the virus. In all narrative accounts, we note that respondents and their households had taken measures to strengthen their immunity by incorporating practices such as eating nutritious food; exploring home-based remedies; adhering to health guidelines such as wearing face masks and washing hands regularly; and proactively seeking and obtaining vaccinations. Only two COVID-related deaths (one of which was not of an immediate family member), and just one formal quarantine experience were reported from the sample.

However, among the few respondents and their families that had contracted the virus, the impacts appear to be varied. In fact, just as with the fear of contracting the virus, the actual experience of being infected has been shaped by their overall health, age and awareness about the virus. While some of them had experienced severe physical pain due to the virus, others had only minor symptoms. The only COVID-related death reported from households in our sample was of a long-time asthma patient.

“For me, COVID is not a big disease. It is just the common cough we experience in life. No need to be afraid of it. We drank Panadol and coriander. There was no major problem. My wife and children were scared. I had no fear.” (Male courier messenger, aged 41, Colombo)

“Everyone in our home got infected with COVID. We did not feel much fear. The other thing is that we did not feel any discomfort because we were vaccinated. The children also did not feel much difficulty. But later, we faced its side effects. We felt tired, my wife and I have asthma.” (Male nurse, aged 40, Matara)

“Our whole family was tested and initially my daughter and I tested positive. Later, my son also got positive. He started to cry that he could not bear that pain. So, I took him to the hospital and stayed there for five days. At that time, I was also a COVID positive patient. After doctor checked my condition, he said that my condition was getting worse and that I needed proper treatment. Then, I was sent to hospital for 10 days.” (Female teacher, aged 43, Trincomalee)

Thirdly, quite apart from the physical aspect of the sickness, numerous respondents who were infected struggled with emotional challenges. These included the fear of transmitting the illness to their families, being sent away from home to hospitals and quarantine centres, and feelings of loneliness and helplessness as highlighted by one transgender respondent in the sample. Additionally, experiences of stigmatization and discrimination from neighbours further compounded their emotional burden. Among the handful of respondents who were infected, the guilt of being unable to take care of family, especially children, was more pronounced among women than men.

“During COVID we suffered a lot because my wife was infected and my daughter was just 6 months old. The PHI said that they were going to take my wife to an isolation camp, but my wife cried and begged them to allow her to isolate at home. After they saw our family’s condition, they allowed it. My wife was depressed because she could not go to the work and she was worried my daughter would also get corona.” (Male fisherman, aged 47, Trincomalee)

“I was affected both physically and mentally during that time, because after I got infected, nobody was there to help me, except my husband. My relatives and mother live far away from my house. So, my husband and I had to manage the situation. I am usually very careful about my kids. During the corona, I had to leave my daughter alone at the house because my husband and I were taking our son to hospital. So, at that time I felt really depressed.” (Female teacher, aged 43, Trincomalee)

“The illness also had a psychological impact on us. I was particularly concerned about my elderly mother, who struggled to breathe at night. I was afraid that something might happen to her. Even if the children had a normal cough, we could not sleep peacefully at night due to the fear. We would wake up, boil water, and use steam inhalation as a precautionary measure.” (Female small business owner, aged 44, Jaffna)

In addition to these direct health impacts, the pandemic also appears to have had an indirect health impact on many respondents by aggravating their psychosocial stress. While the social distancing measures that were instated to control the spread of the virus had been useful in achieving this specific goal, we observe that they have had far-reaching consequences on the psychosocial well-being of respondents at the time. Many respondents in our sample argued that the pandemic had a bigger impact on their mental health than their physical health. Thus, the pandemic’s largest, albeit indirect, health impact has been on the psychosocial well-being of the respondents, as even those who were not actually infected by the virus were still negatively affected by the challenges that arose from the pandemic control measures.

While the narratives suggest that the fear of the virus somewhat subsided with increased information availability, improved awareness, and the initiation of vaccination drives, the ongoing stress of living in its presence took a toll on their emotional well-being. Being confined to closed spaces, grappling with losses of incomes and jobs, facing economic uncertainties, and being unable to meet with friends and relatives or engage in recreational activities, most respondents found themselves in a state of psychosocial distress during the pandemic.

“The pandemic did not affect my physical health. But it affected my psychological health, because I was stressed out during the pandemic. People could not go outside their homes. Because of that, everyone started to release their stress on others. Especially my brothers were really aggressive. They used to scold me for everything.” (Female beauty salon employee, aged 25, Kurunegala)

“Our aunt passed away due to the virus, and during that time, we were in quarantine. Typically, people come to funeral homes to offer their condolences, but nobody attended my aunt’s funeral because she had died of COVID-19. This had a significant psychological impact on us. The level of support we received from relatives and society was much lower than what is customary for a regular funeral at a normal time.” (Female Development Officer, aged, 35, Kilinochchi)

“Physically, I was okay during the pandemic, but mentally I was depressed because I could not go outside and meet my friends. We missed spending time in the park and theatres during our free time.” (Transgender sales assistant, aged 32, Trincomalee)

3.2.3 Economic impact of the pandemic

The economic impact of the pandemic on the respondents and their households has been more profound and complex than the health impact. The direct economic impacts that respondents in our sample have experienced have been transmitted predominantly, if not entirely, through labour market channels. Although such impacts have undeniably been adverse for most respondents, we note substantial variations in the severity of these impacts across individuals. A few respondents have not encountered any notable negative economic impact as a result of the pandemic. On the other hand, a handful of respondents have managed to improve their livelihoods and increase their incomes during the pandemic by adapting to meet the changing conditions and consumption needs amidst lockdowns and mobility restrictions. The indirect economic impacts are largely associated with coping mechanisms that respondents have adopted to mitigate losses and reductions in their incomes. Therefore, these impacts are discussed separately.

The pandemic prevention protocols resulted in the loss or reduction of incomes for a large number of respondents during the pandemic. In comparison, only a handful of individual respondents or their household members had lost their jobs permanently. While we do not have information about the types of jobs that were lost, considering the education levels of respondents, we posit that the few individuals who had permanently lost their pre-pandemic jobs were likely temporary or casual employees in potentially small- or medium-scale establishments. There was only one respondent who had lost a job overseas (in Italy) due to the pandemic.

The low number of waged job losses reported from our sample could possibly be because none of our respondents are employed as waged workers in tourism and leisure, construction, manufacturing or transportation, which were the sectors that were hit the hardest by the pandemic. In fact, nearly all waged employees that we interviewed are employed in permanent government jobs, and so had clearly been insulated from the risk of losing employment and income.

“I didn’t experience significant disruption to my livelihood because I am a government employee. We continued to receive our salaries even though we were at home. Our workplace shifted to a remote setting, and we conducted our work and teaching activities through online platforms.” (Female teacher, aged 29, Kilinochchi)

Nonetheless, it is important to recall from the preceding section that government health sector workers we interviewed encountered many complex non-financial stressors during the pandemic, even though they maintained financial security. The handful of teachers in the sample had to adapt to online teaching, a process that, for some, had entailed a steep learning curve. Therefore, even when jobs and incomes have been secure, we note that the pandemic has still created difficult and challenging work conditions for those with permanent employment in the government sector.

“My work has not been affected due to COVID. But online classes had become a necessity. Although initially I did not have much knowledge about online teaching, I gradually got used to it. Classes had to be done for longer than school hours. And some days I took classes at 6 am.

There was more work than when actually going to work.” (Female teacher, aged 31, Colombo)

“School was closed due to the pandemic. Because of that, we had to teach online. Adapting into that new method was not easy.” (Female teacher, aged 61, Kurunegala)

The lockdowns and travel restrictions had a significant impact on agricultural work, informal sector jobs and business activities. The abrupt implementation of the lockdown during the first wave left many business owners in the sample without a strategy to sustain their economic activities. Moreover, respondents who ran small scale businesses and lacked the required resources to comply with social distancing regulations were forced to close their places of business. Those businesses that remained closed for extended periods due to lockdowns not only suffered revenue losses but also faced additional challenges such as losses incurred from expired inventory. Furthermore, due to social distancing and travel restrictions imposed by the government, there were much fewer customers business owners could sell to.

“I lost my livelihood because after the government imposed the lockdown, we had to close our shop. There was over 50,000 rupees worth of vegetables, when I closed our shop. We cannot keep vegetables for a long time. Also I did not know when lockdown would be lifted, so I gave vegetables to nearby houses for free. I had to face huge loss on that day. Moreover, I didn’t open my shop for a long time, so I lost my livelihood. (Female vegetable vendor, aged 65, Badulla)

“I could not continue my livelihood as a beautician, because with health precautions I was unable to conduct beauty culture work. The beauticians who had assistants and owned big salons could conduct their business as they had enough space to maintain the required distance. My place was not suitable to work at that time. Because of that I closed the salon.” (Female beautician, aged 32, Kurunegala)

“I could not open my business for long periods of time due to lockdowns, which made many goods such as perfumes and cosmetics get expired.

I made great losses on these goods. And I had to take up fishing as an alternative livelihood.” (Male shop owner, aged 43, Trincomalee)

The narrative accounts about business losses imply that the ability to survive and support workers employed by businesses during the pandemic is to a greater extent determined by its scale. For example, one respondent pointed out that salons with large physical spaces could afford to practise social distancing and therefore resumed business much faster than small salons which could not afford to do so. Another respondent (transgender sales assistant, aged 32, Trincomalee) who works in a bookshop mentioned that they received half a month’s salary during the lockdown months. This observation is in line with the conclusions drawn by Wimalaweera (2020) in an analysis conducted using a significantly large quantitative dataset.

Farmers and those engaged in fishing pointed out that, even though they were granted travel permits during lockdowns, this relaxed condition did not bring about any significant positive impact on their livelihoods. While farming itself was not an issue, as this was among the permitted activities during the pandemic, the problem lay in difficulties selling the harvested produce due to travel restrictions. Several farmers also spoke about the losses they incurred as the lockdowns were first imposed quite abruptly, which left them with no time to sell the produce they had harvested. One farmer also explained that permitting farmers to cultivate their lands individually did not help much, because most agricultural activities involve working in groups, and they were still not allowed to gather in one place to carry out the necessary tasks.

“We were engaged in farming without any problem, but although I harvested my vegetables during COVID, because of the lockdown and travel restrictions I couldn’t sell my vegetables to wholesalers. This caused me great loss. (Male farmer, aged 45, Badulla)

“We had planted a lot of vegetables when the pandemic broke out and suddenly the lockdown was imposed. Because of that, we were unable to sell our harvest in the market. Vegetables cannot be stored for a long time, they spoiled soon. So many of us lost our investments and profits at the same time. In the end we were left with nothing. (Male farmer, aged 63, Badulla)

“Agriculture is my full-time occupation, and I grow paddy and vegetables. I faced challenges with selling the vegetables, especially those that have a short shelf-life like brinjal and long beans, which would quickly spoil. I incurred substantial losses by planting watermelons during the pandemic. I faced significant losses as a result.” (Male farmer, aged 53, Jaffna)

Respondents engaged in fishing added that, in addition to domestic travel restrictions, bans on the export of goods also had a negative impact on sales. Moreover, misinformation about consuming fish also had an impact on their incomes. One fisherman from Matara explained that, during COVID, his income from selling fish had dropped by more than half. Nonetheless, through a comparison of the narratives of the limited number of fishers in our sample, we can deduce that the severity of disruption to fishing activities due to pandemic-induced restrictions was largely scale-dependent. Unlike the plight of businesses as we discussed above, fishers engaged in small-scale fishing activities were able to continue earning an income, while the losses were much greater for those with the capacity to catch and sell larger quantities of fish.

“During the COVID-19 pandemic, we were granted permission to continue fishing, but we encountered difficulties in exporting our catch. Locally, we could sell a particular amount. We usually sent our fish to Colombo for sale, but during the pandemic, we faced challenges in doing so. At the beginning of the pandemic, some people were afraid to consume fish. (Male fisher, aged 61, Jaffna)

“I could go to work even though the government put curfew all over the country. I could purchase our necessary groceries during that time by selling fish. I got a special pass to go to work since I go for fishing in the river next to our village. I sold my catch to nearby people. I got the same income as before COVID. I could manage with it.” (Male fisher, aged 28, Trincomalee)

The estate sector workers did not lose their jobs due to the pandemic, but the number of days they could work was cut down drastically as factories operated below capacity. Initially, when factories were closed, they did not have any income,

but as work slowly resumed, respondents could return to work, but for a much fewer number of days which reduced their incomes significantly.

“My husband and I work in the estate, so we didn’t lose our job, but because of the lockdown, our factory was closed for several months, and we had to stay at home without any income. Then, we returned to work during the pandemic, but unlike before, there was work only two or three days a week. If we pick more than 18kg of tea leaves, then only we can get 1,000 rupees, if not we received just 700 rupees.” (Female tea plucker, aged 60, Badulla)

Most respondents who were engaged in daily-paid informal and unskilled work and self-employed individuals also faced significant economic vulnerabilities during the pandemic. With the spread of the pandemic, most domestic workers and casual labourers were out of work as employers were reluctant to allow them inside homes or into their gardens. The opportunities to earn an income was ad hoc and limited, both due to the pandemic and mobility restrictions imposed to contain it.

“During COVID, we didn’t have wages. No one called us for work. We had work only if someone in the neighborhood called us to pluck coconuts from a tree. We had some payment then.” (Male labourer, aged 41, Matara)

Only one female respondent managed to sustain a regular income as a daily domestic maid, and this was made possible by the benevolence of her employer, who permitted her to come and clean their house a few times a week. One respondent lost most of her string hopper buyers because she was infected with the virus and had to be in quarantine for 30 days.

“During the COVID-19 pandemic, we were unable to conduct our regular business, which was quite challenging. However, as the lockdown restrictions were lifted, I was able to make a considerable profit. I sold masks, sanitizers, and other items, and people came to purchase these goods. This allowed me to sustain my business. I offered lower

prices than the shops. Thanks to the grace of Allah, we did not face any challenges related to meals. (Male entrepreneur, aged 55, Kilinochchi)

The handful of three-wheeler drivers also explained that travel restrictions significantly harmed the economic well-being of their households, as they were forced to stay at home during curfews and lockdowns.

“My livelihood is driving [a three-wheeler]. During the COVID period, I was out of work because we had to stay indoors. Work was minimal in 2020 and early 2021. I was very worried about not being able to go to work and not being able to provide for my family. I couldn’t get any other job. My brother does his office work at home. I have no chance of that. I spent most of my time on social media and it put my mind at ease. Even on days when the curfew was lifted, people did not go out in large numbers. I didn’t have many hires. I was able to earn very little income.” (Male three-wheeler driver, aged 32, Colombo)

The economic impact of the pandemic was particularly harsh for one respondent who lost her husband, who was also the main income-earner of the household, due to the virus. The female widow, aged 42 from Colombo, explained that in 2020, her household managed with her husband’s income and did not experience many financial problems, despite the outbreak of the pandemic. But when he was hospitalised in 2021, there were additional expenses on tests, medical bills and transport to visit the husband in hospital. After three months of her husband’s passing, she turned her hobby of sewing into a means of livelihood to support herself and her son. However, she faces the challenge of not having a proper sewing machine and being unable to afford one.

One female respondent from Trincomalee lost both her husband and son 43 days apart from each other in 2021, but not from the COVID-19 virus. She did not appear to have been financially affected that significantly, given that her husband’s income had been both sparse and sporadic, while her son had been a chronic kidney patient most of his adult life:

“My husband was an artist. He did not have work most of the time. If he had work, he did, otherwise he stayed at home. If there was

any artwork at a hotel, nursery or in the cemetery, he would go and do it. He used to sit on this chair most of the time. He took his last breath also on this chair. He died of old age. My son died from chronic kidney disease. Before COVID, the government gave a small allowance to my son because of his kidney disease. After his death, they give his daughter's school supplies every year through the AG's office [Divisional Secretariat]. So, I do not have to spend any money to get school supplies for her. I am the one who has earned a living for the family so far. I have learned to live with what I have; whatever God has given to us is enough." (Female casual employee at restaurant, aged 65, Trincomalee)

Although she expressed sorrow and grief over being unable to hold proper funerals for both of them, and has started taking medicine for high blood pressure caused by the distress of losing them within a short span of time, her account did not reflect the same intensity of vulnerability as we discerned in the story of the widow from Colombo. Thus, while the sense of loss, pain and emotional vulnerability induced by the death of a loved one cannot be overlooked, we posit that the economic impact of such an idiosyncratic shock is notably influenced the deceased family member's contribution to the household income. Put differently, the impact of a shock such as the death of a family member during the pandemic seems to be significantly exacerbated if the deceased individual has been the sole or a substantial contributor to the household income.

We observed significant pandemic-induced economic and social impacts on the three households in our sample who depended solely on transfer income from abroad. Two of these households faced economic distress as their breadwinners lost their jobs in Italy and were out of work for prolonged periods of time. The plight of the third household was much worse, more complex and unrelated to the pandemic, as explained by the respondent:

"There are no words to talk about the COVID period. In 2020, I sent my elder daughter to Qatar to earn. During COVID, she got pregnant with someone and gave birth in Sri Lanka. I had another responsibility to take care of that baby. Now she is two years old and she stays with me. In 2021, she [the daughter] went to Qatar again as a domestic maid

because of our family's financial struggle. But this time she was sent to a house where owners tortured her so much that she ran from that house. Now she is staying at a friend's house and that friend gives my daughter food every day. Now, we have no earnings from her and she is afraid to go the Sri Lankan Embassy." (Female domestic maid, aged 38, Trincomalee)

There was only one migrant worker in our sample and she explained that, although her job as a domestic maid in the Middle-East was secure during the pandemic, her workload increased drastically as everyone in the employer's household was at home. Having to adhere to health and safety measures meant that she did not have an opportunity to go outside for a break. She explained the drudgery of her work, as follows:

"It was really hard time to me as a house maid; I had to work very hard since the work load increased more than usual. The entire family stays at home...In Saudi Arabia, there are many children in a family; it is not like families in Sri Lanka with two or three children...I can say that I worked day and night without proper rest during the lockdown." (Female housemaid in Saudi Arabia, aged 32, Trincomalee)

The situation of respondents who were unemployed during or before the pandemic and their households was made worse due to several reasons. First, the economic slowdown amidst lockdowns and travel restrictions made it more difficult to find gainful work. One respondent explained that, after he was laid off by his previous workplace due to the pandemic, his full-time job became looking for another job. Secondly, the increase in the number of dependents at a time when households were living on reduced income levels further exacerbated the economic hardships of the household. Many of the unemployed individuals had to resort to alternative short-term productive activities, such as home gardening, preparing and selling food on the road side, and petty trading, to help their households make ends meet.

The only respondent with disabilities who has been unemployed for long, experienced severe economic destitution during the pandemic. Although she had earned an income several years before, her disability had forced her to discontinue working and rely on her children's financial support.

“I am currently living alone, with my children residing nearby, but they seem to be abandoning me. Unfortunately, my disability prevents me from working, and my children have expectations from me without offering any support in return. It is extremely difficult to make ends meet without any income, and I rely on assistance from the *Grama Niladhari* when it’s available to afford my daily meals.” (Unemployed female, aged 65, Kilinochchi)

In our sample, there are only three examples of positive economic impacts due to the pandemic. The first is of a female respondent who managed to increase her income from tuition classes, as she could reach a larger audience through online classes. The second is of a male business owner who managed to keep his business profitable during the pandemic by diversifying into products such as masks, sanitizers and immunity-building herbal products that were in high demand at the time. The final example is of a young male business owner who was able to thrive economically by adapting to the market dynamics at the time. He explained:

“I didn’t lose my livelihood. I actually earned more during this period [pandemic] than before. When lockdowns were imposed, I had to close my shop too. But after that, I thought about what I should do. Usually, I would buy eggs from Kurunegala, but because of travel restrictions I could not go there. Later I heard that the DS [Divisional Secretariat] gave travel passes for business purposes. So, I went to meet our *Grama Niladhari* and said that I had to go to Kurunegala to buy eggs for my business, and he gave a letter. I took it to the DS and they gave me a travel pass. My friend and I went to Kurunegala to buy eggs. We found coconuts also for low prices there. I bought coconut too and came back. I sold both eggs and coconut, going from place to place. Many people bought eggs and coconut from me, because they could not go outside. I had a good business, therefore I continued it until the country reopened. I got good profit than ever before.” (Male business owner, aged 24, Badulla)

3.2.4 **Intersecting vulnerabilities of the pandemic**

Although we have analysed the health and economic impacts of the pandemic under separate headings, we acknowledge that our analysis is incomplete and perhaps even misleading without a discussion that examines these impacts from an intersectionality lens. While all households have faced the pandemic and grappled with the challenges of the pandemic prevention measures, we notice that the experiences are conspicuously varied across households. Thus, in a hypothetical continuum of economic and social vulnerability induced by the pandemic, where would we position a household that has lost its income versus a household that has lost both its income and its breadwinner owing to the virus, or a household headed by a woman with a disability? Moreover, how do we account for additional drivers of vulnerability, such as chronic poverty, systemic marginalisation that has been existing since long before the pandemic, issues of alcoholism, lack of skills, limited employment opportunities, and inequitable social norms, that further amplify household socioeconomic susceptibility to shocks?

To analyse these, we now turn to how the intersecting challenges have shaped the socioeconomic vulnerabilities of the respondents and households in our sample. We first look at the intersecting health and economic impacts of the pandemic. As mentioned earlier, not many respondents or their household members had been infected by the virus, or been hospitalised. Only one respondent had experienced death from the virus in the immediate family. However, the few respondents who had been affected by the virus and the economic impacts of the pandemic spoke of unforgettable and bitter experiences of having to grapple with negative emotions such as stress, loneliness, sorrow, fear and anxiety. The overlapping challenges of having to face economic distress while also coping with anxieties about dealing with the virus – the quarantine process, fear of transmitting the virus to small children and elderly parents, the sadness about being unable to hold funerals for the loved ones deceased from the virus – have resulted in psychosocial stress among several respondents.

“During the pandemic I lost my job. I used to do some home-based technical repairing to earn money during that period. Because of that we faced lots of economic difficulties. At the same time, my mother-in-law was infected with the Corona virus. She was sent into isolation at

a quarantine centre somewhere around Kandy. All those were bitter experiences.” (Unemployed male, aged 42, Kurunegala)

“My husband lost his business due to the pandemic, and this caused problems between us because our economic situation was deteriorating. Physically, we suffered from the COVID virus and there was a lot of stress and depression because we could not go out anywhere.” (Female teacher, aged 28, Badulla)

The only respondent to have lost immediate family – her husband – from the virus explained how his demise impacted her household not just financially, but also psychologically. Importantly, her story is a powerful example of how the intersecting effects of health and economic impacts might lead to long-term household economic destitution:

“Although the hospital said that my husband died of COVID, I still can’t believe it. My husband and I had wheezing so we did not go out of the house during the pandemic. We were very careful. Sometimes my husband went to work when there was no curfew. My salon was also closed during COVID. We lived on my husband’s income and, although there were financial difficulties, we managed. But after my husband died in 2021, my life became hell. Part of me died with him. I don’t want to live. I live my life only for my son. We are now in a very poor economic situation. I don’t know what the future holds. Every day from the time I wake up in the morning and until I go to sleep at night, there is no happiness. I had a good life. But not now.” (Female seamstress, aged 42, Colombo)

The risk of experiencing intersecting health and economic impacts was highest for respondents living in densely populated arrangements. One respondent living in a low-income housing settlement in Colombo pointed out that her housing scheme had 500 houses located very close to each other, which catalysed the spread of the pandemic quite fast. Although she and her husband were not infected, most of her neighbours contracted the virus which made leaving the house to go to work quite risky. In addition, she also explained that economic hardships during the pandemic gave rise to drug abuse, petty theft and robbery which affected her personal security

and safety at home. Another respondent from Colombo highlighted the intersecting challenges faced by people living in slums during the pandemic:

“People living in slums in Moratuwa were affected the most. They are already economically vulnerable. Their livelihoods have been greatly affected by the outbreak of the pandemic. Moreover, in slums, the impact of COVID infection is high as the houses are built very close together. They were more affected by the disease. They are also more prone to flooding. Coping with COVID is very difficult for them as they are living in the midst of many problems. As far as I know they were more affected than all of us during COVID.” (Male unemployed dancer, aged 29, Colombo)

Although the loss of income posed a significant challenge for many households in our sample, we observed distinct variations in the extent of social and economic vulnerability induced by these economic consequences. This variation seemed to depend on whether a household had lost only one earned income source or all of them. We observed that many of those that had lost one source of income still managed to meet, albeit not entirely, their household expenses and needs. In contrast, we detected a heightened sense of anxiety and uncertainty about “survival” in households that had lost all earned income sources due to the pandemic, regardless of whether they had had just one income source or multiple sources. Such households also had to be on the lookout for temporary jobs, often even risking their own health and safety to go out and find work.

“I worked in a house as a servant and during COVID, I lost my income. Every morning I went to work and returned home in the evening. They paid me a daily salary. If I go to work, I get 700 rupees and I don’t get paid if I don’t go. My husband works at a shop in the town. He also lost his job and stayed at home. So, we both lost our income. On some days that the government lifted the lockdown for people to go and buy goods, he went to the shop to work and the shop owner paid for that day.” (Female domestic maid, aged 22, Badulla)

“The economic problems are unspeakable. I am the breadwinner of the family and because of the pandemic, I could not sell any fish. My trade has stopped completely. Because of that, it became a problem for us to buy food to eat and our eldest child could not go to school.” (Male fisher, aged 32, Matara)

“During COVID we struggled a lot because we did not have any income. So, we survived with relief support and we waited for help from someone during that time. We could not go to work during that time. I was ready to go to work but my employer advised me not to come since she was afraid of contracting the virus.” (Female domestic worker, aged 38, Trincomalee)

The health and economic impacts have further aggravated the pre-existing vulnerabilities of some households and thrust them further into poverty. For example, one female respondent pointed out that her husband’s alcoholism exacerbated their economic distress during the pandemic. Moreover, the account of the only respondent with a disability in our sample, who is from Kilinochchi, reflects an amplified sense of economic and social vulnerability. She explained in detail how she grappled with many intersecting vulnerabilities as a woman with disabilities who had no income and had to rely on her children for survival. Nevertheless, another respondent, who takes care of her blind brother, highlighted the importance of the disability allowance of LKR 5,000 that her brother receives. This financial support proved beneficial to the household, especially because her income significantly decreased when the tea factory curtailed activity during lockdowns, operating only a few days a week, as opposed to the regular 6 or 7 days a week prior to the pandemic. She also spoke about the assistance and support she received during the pandemic from her community and the *Grama Niladhari* Officer who was aware of her household’s economic conditions. In contrast, the female respondent with a disability from Kilinochchi felt abandoned and neglected during the pandemic. Thus, the extent of the impact of disability on household economic and social vulnerabilities does not seem to be consistent across all households experiencing it.

The handful of female-headed households in the sample also faced specific economic and social challenges during the pandemic. In addition to their apprehensions about household economic conditions during the pandemic, concerns about personal security during lockdowns, in the absence of a male head of household, also emerged from their narratives (Bau et al., 2022).

“Compared to others in our village, the pandemic had a relatively higher impact on us because we are a female-headed family. When there’s a father at home, there’s usually a sense of security that he can take care of the family, but in our case, we had to handle everything ourselves.” (Female farmer, aged 48, Kilinochchi)

“There are some single mothers in my village like me. In my view, compared to households that had husbands, we faced many problems in terms of loss of income, insecurity, fear.” (Female nursery school teacher, aged 31, Badulla)

The few respondents with diverse sexual orientations and gender identities in our sample shared insights into the vulnerabilities they faced during the pandemic due to their non-conforming identities. On the one hand, all of them had lost incomes as they could not engage in their livelihoods, and on the other hand, they were living alone away from home during the lockdowns which seems to have exacerbated their isolation, a pattern consistent with evidence elsewhere (Hawke et al., 2021; Salerno et al., 2020). For example, one respondent who identifies himself as homosexual explained:

“I stayed in my room during the pandemic. I do not have a roommate or anyone. I struggled to get food; I did not have cooking facilities in my room at that time because I used to buy food from outside. So, whenever the government lifted the lockdown, I bought food like biscuits and bread. After some days, I bought a hot plate and started to cook. The main struggle is that we cannot ask for help from anyone because if they identify us, they will spread the news to others.” (Male undergraduate and part-time shopkeeper, aged 27, Trincomalee)

“LGBTQI [lesbian, gay, bi-sexual, transgender, queer and intersex] people like me are always vulnerable. Especially, transgender people like me don’t have access to everything in society. So, life becomes difficult when such an emergency occurs.” (Transgender makeup artist and activist, aged 35, Colombo)

Household demographics, especially the presence of babies and small children and elderly, have added to the household’s economic and social vulnerability. The presence of small children and the elderly, who were typically considered more susceptible to catching the virus than older children and adults, created complications on many fronts. First, parents with children, especially small babies, who had to go out for work experienced stress and anxiety over the risk of passing on the virus, while children with ageing parents had similar concerns. In addition, older respondents who had to go to monthly clinics and top up their prescription medicine were uncertain and anxious about being able to access essential healthcare services. Respondents with compromised health, resulting from recent surgeries or respiratory issues like asthma or wheezing, experienced heightened economic vulnerabilities. This was exacerbated by the fact that when other household members went to work, it increased the risk of virus exposure, even for those who remained at home.

Thus, while the pandemic constituted a universal shock affecting everyone, the socioeconomic impact of the exposure was dependent on a myriad of overlapping and intersecting factors that rendered many households in our sample vulnerable, albeit with significant heterogeneities. As one respondent aptly put it:

“The impact of the COVID-19 pandemic varied based on individual family circumstances, living environments, and psychological factors. In my opinion, our family had a lower impact compared to others. This is because we had stable government jobs, and even during the lockdown, we continued to receive our salaries. This ensured that we had enough to eat. However, for daily wage earners, the situation was dire as they often struggled to afford basic necessities, including meals, during the pandemic.” (Female development officer, aged 35, Jaffna)

3.2.5 Impact on education

Disruption to education was a significantly negative effect of the pandemic on the vast majority of the households in our sample. It is evident from many narrative accounts that the transition to online education, as schools and other educational institutes were closed due to the pandemic, necessitated a significant adaptation process that involved steep learning curves for both students and teachers alike. The handful of teachers in our sample agreed that maintaining the same level of instructional quality in online classrooms as in traditional in-person settings was challenging. They struggled to keep students focused and engaged as students could not be supervised effectively in virtual classrooms. Some expressed concerns about a rise in opportunities for copying and cheating during assignments. Ensuring the authenticity of homework and tests proved challenging in the online format, as it was difficult to monitor as effectively as in a physical classroom. Poor network connections and shortages of devices also made it problematic for both teachers and students to effectively participate in virtual classes. Several of them also discussed how the switch to online teaching created inequalities in access to education by excluding students from poor households from participating in virtual classes.

“The main issue when we are conducting online classes is the poor network. So many students and teachers are affected from this. Moreover, many poor students are unable to get a proper education as they do not have smartphones or laptops at home. Thus, education reaches only a few students.” (Female teacher, aged 28, Badulla)

The large majority of parents echoed similar opinions about the deterioration of the quality of education after it was taken online. A handful of them were also unsure if children managed to understand what was taught. In fact, several respondents who were themselves attending online classes for their higher studies admitted that they were not happy about the quality of education they received online. Some children had lost interest in their education altogether, as reflected in the following quote:

“Overall, they [children] loss their interest in studies. My elder daughter asked me several times, ‘Shall I leave school? I am not interested in

studies.’ But I did not allow it because I strongly believe education is a must for a good life.” (Male farmer, aged 45, Badulla)

Children missing out on the socialisation process was another significant concern for many parents. On the one hand, not being able to interact with their friends seems to have created stress and anxiety among children. As they were deprived of social interactions that a classroom context offers, many children resorted to consuming content on smartphones and on televisions as an alternative source of engagement, with several respondents reporting that this was done excessively. Many parents found it difficult to discipline children, especially small children, to sit through online classes, which in fact added to women’s unpaid responsibilities during the pandemic, as discussed elsewhere.

“My daughter’s school also started to teach online but I didn’t find it to be a successful method of teaching for the younger generation. They don’t even sit for half an hour in one place. So, our biggest challenge was getting her to learn on an online platform.” (Male technical assistant at a telecommunication company, aged 42, Kuliyaipitiya)

“Children had school on Zoom. We really were not sure about the effectiveness of these online classes. Since they were not face-to-face classes, children were playing and watching videos when the class was going on.” (Male shop owner, aged 43, Trincomalee)

The non-availability of devices was a significant barrier to children’s participation in online education. In some households in our sample, children had to miss a few classes initially because devices such as smartphones, that would facilitate the participation in virtual classes, were not available. One female respondent had to pawn her necklace to buy a smartphone for her children to participate in classes. In another household, children had to go to their neighbour’s house to participate in classes, which was not always feasible as some sessions started late in the evening and continued late into the night. One female respondent from Trincomalee said, as no one from the government was monitoring the adherence to mobility restriction protocols in her village, she managed to send her daughter to a physical tuition class that was being conducted close to her home. In one household, children did

not participate in online classes at all as the household could not afford to buy a smartphone:

“During the days of the pandemic, school children were taught online. But our children didn’t have a phone to attend these online classes. There was no way we could buy one, and that is why my children missed participating in these classes.” (Male casual labourer, aged 41, Matara)

Yet, having a device that would facilitate online education did not always help. We observed that, in households with several children who had virtual classes simultaneously, it was a challenge to manage with a single device. There were also instances where the electronic devices would be only available to children once parents had finished work online or returned from their places of work (in the healthcare sector). In some instances, it was not possible to purchase mobile internet data cards because nearby communications shops were closed and mobility restrictions hindered access to shops further away. Several respondents also pointed out that the additional or increased internet bills were a strain on their household expenses. A handful of respondents also highlighted how frequent power failures in the areas they lived in caused disruptions to children’s online classes.

The negative effects of the pandemic on education being compounded by household economic hardships are vividly illustrated in a handful of experiences from the most impoverished households in our sample. As discussed above, the inability to afford an electronic device stood in the way of children in certain households, primarily the poorest, participating in virtual classes. In one instance, the non-availability of required infrastructure compelled parents to jeopardise children’s health and safety and send them to physical classes that were held in violation of health regulations. In another instance, the respondent could not afford to pay for her child’s Spoken English class because of income losses due to the pandemic. One respondent also discussed the challenges faced by children living in the estate sector. In addition to contending with the challenges of the lack of necessary devices and poor internet connections, they also coped with the discomfort of living in small and congested quarters with large families which proved disruptive during online classes. The respondent also highlighted that a few young boys in their estate dropped out of school and opted to work as casual labourers in Colombo,

thus underscoring instances of permanent losses of human capital attributable to the pandemic.

“Children cannot study in online classes without disruptions because there are a large number of families living in a small space. The sounds from television, radio, and people talking disturbed them. In our estate, many youngsters dropped out of school and went to Colombo as labourers. Moreover, when online classes started, children could not study without disruptions because there are a lot of families living in one place. The sounds of the television and radio and people talking disturbed them. My children did not attend several classes due to the lack of network coverage.” (Male tea plucker, aged 52, Badulla).

3.2.6 Gendered impacts of the pandemic

Curiously, in our sample, we do not observe particularly marked gendered impacts on livelihoods due to the pandemic or the economic crisis, although there are conspicuously stereotypical gender patterns in the types of employment and livelihoods undertaken by the respondents. For example, women typically work as beauticians, teachers, housemaids, mid-wives, petty traders, and seamstresses, while men are predominantly farmers, fishers, three-wheeler drivers, and small and medium scale business owners. Although there are women and men who are casual labourers, most women are engaged in cleaning and domestic work, while men work outside and in physically demanding jobs as masons, coconut pluckers, or garbage collectors. Similarly, while both men and women engaged in farming, most females were either working alongside their husbands in farming or managing smaller plots of cultivation in contrast to the larger plots of land cultivated by male farmers in our sample. Tea plucking and nursing emerged as the only gender-neutral employments in our sample.

The main gendered impacts of the pandemic emerged in relation to household dynamics, especially in relation to women’s gender role as unpaid caregivers. As discussed in a preceding section, we observed several women in the sample who were infected with COVID grappling with feelings of guilt as they were unable to care for their husbands and children. They also worried about the risk of passing on the infection to their children. A handful of female respondents with toddlers

and babies expressed heightened vulnerability during the pandemic due to fear that their children might catch the virus. Women who cared for elderly parents also were concerned about their health and safety. One female respondent explained:

“My only goal during COVID was to feed my father, mother-in-law, son and husband at least twice a day. There was no other purpose. COVID was a shock for us.” (Female cleaning maid, aged 41, Colombo)

Most female respondents in our sample experienced an increase in the unpaid domestic workload as household members spent more time at home during the pandemic. Even most of the female respondents who did not consider that their workload had increased due to the pandemic mentioned that they did the household chores as usual although other family members were home. A few women who also engaged in income-earning activities were particularly affected by the increase in unpaid care work.

“My workload increased a lot during the pandemic. At my home, I was the only one who had to do all the chores at home. Sometimes it would lead to a fight with my husband, because all he did was eat and watch TV. In the evening, he would go to a friend’s house to play carrom. Sometimes I fought with him about this.” (Female housewife, aged 22, Badulla)

“There was a lot of work for me. Earlier, I had a housemaid to help me with chores. But during the pandemic, she couldn’t come. So, I had to do all the work myself, and I had to take care of my children too. My husband was at home, but he didn’t help me, I had to do all his work as well. (Female teacher, aged 28, Badulla)

“All household responsibilities are taken care of by my wife. She is like a one-man army, she took care of us and helped with farming too. I rarely helped my wife in household chores.” (Male farmer, aged 45, Badulla)

“I took care of all the household responsibilities myself. My husband helped sometimes. But mostly I did everything myself. I used to get only 4-5 hours of sleep during COVID after work and completing housework.” (Female cleaning maid, aged 41, Colombo)

We also posit that the unpaid care burden on women was further exacerbated as many households turned to home-based remedies to boost the immunity of their family members. For example, many households had taken precautions by eating home-cooked food, drinking boiled water, coriander and other herbal drinks, and consuming roasted garlic, citrus fruits, and other immunity-boosting foods. Moreover, most households were meticulous about household cleanliness during the pandemic. Women, as evident in the narrative accounts of respondents, have shouldered most of this additional workload.

“We steam-inhaled three times a day. Every day my wife grinds cumin, garlic, curry leaves, coriander and pepper and makes rasam. Rasam was a great food for sore throats. We ate this kind of food.” (Male courier messenger, aged 49, Colombo)

“Although we did not get the COVID infection, my mother-in-law and father and my child were at high risk of infection, so we drank hot coriander water daily. We don’t have money to eat healthy food or anything. We ate the food we got. However, we were scrupulously clean physically. If I bought green vegetables, I cooked them after adding turmeric and washing them well. Neem is a disinfectant so I kept a lot of neem at home. (Female cleaning maid, aged 41, Colombo)

We observed that the sudden transition to online education also imposed significant strains on women’s time, especially those with young children, in line with observations made by Kalansooriya (2020). On the one hand, school closures significantly affected children’s discipline and mothers often had to take up an additional unpaid role to discipline children and encourage them to study. On the other hand, lack of resources – such as laptops, smartphones, poor or no internet connections – pushed women with more than one child participating in online classes to manage scarce resources with much difficulty. In addition, several female respondents spoke of their children’s excessive engagement with phones

and video games as well as fears of young children consuming dangerous or age-inappropriate content.

“Online education was the biggest challenge. I had no time to do even household chores because of those online classes. My child was very young and he was not capable of focusing on his studies using an online platform.” (Female laboratory assistant, aged 35, Kurunegala)

“My oldest daughter was in Grade 10 at the beginning of the pandemic. Suddenly schools were closed and private tuition classes also stopped. So, she also stopped studying and started watching TV and reading story books. It was a very challenging task for me to advise her and push her to study. After starting the online classes, there was only one smart phone in our home. But classes were held for both my children at the same time. It was very difficult to manage the classes with one device. Another problem was the poor network connection. (Female nursery teacher, aged 31, Badulla)

We also observed instances where women faced various forms of intimate partner violence and domestic violence stemming from the heightened tensions and uncertainties of living with the pandemic and compounded by the collapse of spatial separation amidst mobility restrictions. A handful of male respondents explained that they sometimes took out the stress of their increased workload or the frustration of their job and income losses on their wives. A few female respondents pointed out that sometimes what would have been negligible arguments under normal circumstances escalated into tense situations during the pandemic because household members were stuck within the confines of home without outlets to express their feelings. Women often bore the brunt of it, especially in households where they lived in extended families with in-laws. Only one respondent reported physical abuse, which she has experienced since the beginning of her marriage.

“We had many economic difficulties. There were many family problems due to financial problems. My husband was not at home for a few months. It also had a negative impact on our family life. My mother-in-law had conflicts with me during the pandemic, because I

was unemployed at that time.” (Female laboratory assistant, aged 35, Kurunegala)

“My mother-in-law would get angry [about watching TV] and fight with the people in the house. It’s a small thing, but during COVID, when this happens often, it creates uneasiness. My husband scolds me if I speak against my mother-in-law. My son cries to watch TV. These kinds of fights were normal as everyone was at home. Since my husband doesn’t have a job, he often visits neighbours. His mother doesn’t like it because she is worried about the virus and scolds him. Sometimes, these conversations turn into fights.” (Female daily domestic worker, aged 41, Colombo)

“My family and I did not contract COVID, but there was a psychological effect. With the work overload, I felt stress and depression. When the ward is busy with many patients, we don’t even have time to have our meals. I think during these days I got a lot angrier than usual. Sometimes if my wife called me at work, I would shout at her.” (Male nurse, aged 40, Badulla)

“When I lost my job, I spent most of my days at home. Sometimes, due to stress I would get very angry even for little things. I would scold my wife and children when I get angry. But my wife was very patient. It is disturbing to think now that I scolded the children. But I didn’t do it on purpose. Losing a job suddenly was emotionally very disturbing. My wife coped with everything.” (Male courier messenger, aged 49, Colombo)

3.3 Economic crisis and its impact on households

Although the original design of this study aimed to investigate the impact of the pandemic on household economic and social vulnerabilities, the economic crisis that unfolded in 2021 necessitated an extension of the scope of our data collection to also examine household vulnerabilities induced by the economic shock. Accordingly, our interview guides included a question probing into impacts of the economic crisis on respondents and their households.

We discern a significant difference in how the economic crisis has affected households in our sample, compared to the pandemic, and observe two major reasons contributing to the distinct effects of the economic crisis on households. First, unlike the nuanced health, social and economic impacts experienced during the pandemic, we observed a consensus among all respondents that the economic crisis had a more profoundly adverse effect on household economic situations. In fact, some respondents argued that the pandemic situation was much better than their experiences during the economic crisis. Secondly, the impact of the economic crisis was predominantly channelled through the commodities market. A common theme pervading all interviews is the increased cost of living due to the sharp rise in the prices of goods and services, especially essentials. Even those respondents that managed their household finances during the pandemic, found themselves in economic distress during the economic crisis. Households that were already grappling with the adverse impacts of the pandemic on their livelihoods and incomes found themselves further disadvantaged, as they were forced to navigate a new set of challenges arising from the reduced real value of their incomes.

“We could at least manage [our expenses] during the pandemic situation, but we could not manage [our expenses] during the economic crisis. It created a negative impact on our lives. Our income remained the same and expenses increased threefold. My salary was enough to cover all expenses during the pandemic, but during this economic crisis the salary is not enough to meet expenses. So, we sometimes have to sacrifice some of our needs and wants. The crisis was a really hard time to all the people in Sri Lanka.” (Transgender sales assistant, aged 32, Trincomalee)

The most common concern among all respondents in the sample, including those whose livelihoods and incomes were not significantly affected by the pandemic, was the sharp erosion in their purchasing power. Most respondents were struggling to make ends meet with their existing income levels. As one respondent pointed out:

“Our salary is still the same as before the economic crisis, but the prices of products are increasing day by day. As plantation workers, we receive only 1,000 rupees a day, and even from that, sometimes they reduce 100 or 200 rupees. Then we have only 800 rupees or less left.

How can we afford to spend a day with that money at current prices?”
(Female tea factory worker, aged 54, Badulla)

Inflation made it difficult for households to not only meet their expenses, but also to plan their budgets. Several respondents pointed out that earlier, as prices were reasonably predictable, they could estimate the amount of food they could bring home for a given amount of money. But with sharp and sporadic price hikes during the economic crisis, many respondents could only purchase less than half the amount of groceries they would have bought pre-crisis for the same amount of money. Many respondents have had to make significant adjustments to their lives, such as cutting down on non-essential and luxury spending – going on trips, buying clothes, eating at restaurants, celebrating festivals – as they struggled to meet the expenses for necessities. More negative adjustments included cutting down on nutritious food and in some cases even vegetables and basic foods, or foregoing eating three meals a day. Such adjustments were particularly noticeable among those living on a single income source, especially female-headed households.

“We live in a situation where we have to think about the food we eat each day, due to rising prices. Now we have completely stopped buying eggs, meat, fish, powdered milk etc. The price of eggs is increasing day by day. The cost of living has increased tremendously.” (Female housewife, aged 55, Colombo)

“It is very difficult to live in this economic crisis because the price of all goods is increased. I am unable to purchase clothes or toys for my children. With great difficulty, I managed to purchase clothes for my children for the last Deepavali festival. I could not buy cloth for my wife and myself. We have to sacrifice ourselves in order to make our children happy.” (Male fisher, aged 28, Trincomalee)

Many respondents discussed how the shortages and increases in the prices of medicine had added to their own personal vulnerabilities. A small number of respondents also discussed how the price hikes in and shortages of gas and fuel further exacerbated household vulnerabilities. Increases in water and electricity bills put an additional strain on household economic conditions, especially in households with small children and older adults. A handful of households with

loans and leases have struggled to meet their financial obligations, while a few resorted to borrowing to smooth consumption.

“My wife is taking medicines for high blood pressure. There are no medicines at hospitals. But we can’t afford the price of medicines in pharmacies.” (Male hospital attendant, aged 40, Kurunegala)

“I still haven’t paid our electricity bill for 3 months. Now we have received a red notice.” (Female seamstress, aged 42, Colombo)

The household impact was also to a large extent influenced by the size and demographic composition of the household. Several respondents pointed out that they could manage as their households were smaller in size, but larger households struggled to meet their regular expenses.

“Fortunately, my household consists of only three members, so we are somehow managing. However, one can only imagine how difficult it must be for households with larger families.” (Male fisher, aged 61, Jaffna)

“The prices of goods have risen, and in our household with six members, our monthly food expenses now total 30,000.” (Male casual labourer, aged 23, Jaffna)

Numerous households with children attending school or participating in other full-time education programmes spoke of the challenges they encountered due to rising costs of school supplies, tuition fees, and challenges related to fuel price hikes as well as fuel shortages.

“We could not send our children to school during the fuel shortage. We could spend on fuel, but there was no fuel available at petrol sheds. My children’s participation in tuition classes was also affected because of this.” (Female public healthcare midwife, aged 29, Trincomalee)

“My grandchildren are in school. We are facing many problems in supporting their education, because we have to allocate a huge amount

of money for their education. They are still very young, but their expenses are very high.” (Male farmer in coconut plantation, aged 63, Kurunegala)

“Nowadays prices are increased day by day, especially school equipment like, books, pens, pencils and transport. My three younger children go to school and my son is following a course in a vocational training centre. Imagine how much it costs to send three children to school at the same time?” (Male farmer, aged 45, Badulla)

We observed several types of livelihoods that were adversely affected during the economic crisis. Sharp price increases resulted in losses for businesses selling non-essential goods and services. For example, shop owners who sell beauty products and cosmetics, salon owners and beauticians, and bookshops selling school supplies saw their sales drop significantly. Even food-based businesses were adversely affected as people had cut down on their essential expenses.

“Egg prices are increasing in unexpected ways, and because of that, nobody buys eggs now. So, I lost my business and now I have to face so many problems in my life.” (Male business owner, aged 24, Badulla)

“Our business is down because people don’t buy vegetables for high prices. Our business also depends on local tourists. Nowadays because of the high cost of living, many people don’t come here, so we lost our business as well.” (Female vegetable vendor, aged 65, Badulla)

The livelihoods of three-wheeler drivers was particularly affected by fuel shortages and price increases. Several households relying on incomes from three-wheeler hires described multiple challenges. On the supply side, their ability to pursue their livelihoods had been hampered by the non-availability of fuel. On the demand side, the rise in fares caused by fuel price increases, and a general decline in people’s spending power have led to a reduction in the number of hires they receive, resulting in lower incomes.

“The diesel and petrol price hike has completely affected my business. As I was driving a three-wheeler, I was jobless for several months

because I could not get fuel. Hires are also less because people do not go in three-wheelers as much.” (Male three-wheeler driver, aged 32, Colombo)

“The main issue for us was the lack of petrol and diesel. My husband is a three-wheeler driver. He was at home and was unable to drive his vehicle for several months due to the petrol shortage. He has work now. However, he would give me only 1000–1200 rupees a day from his daily earnings, as he has to pay the lease for the three-wheeler.” (Female cleaner, aged 41, Colombo)

We have leases to pay, the vehicles need regular servicing, and we have wasted time, many hours, waiting in queues to get fuel. I have been in a queue to buy fuel for five days and I spent several nights in the vehicle waiting for fuel. (Male three-wheeler driver, aged 42, Badulla)

Kerosene shortages had affected the livelihood of the only deep-sea fisher in our sample. Another respondent who ran a small business that manufactures herbal products struggled to transport supplies to shops due to the non-availability of transport services, amidst fuel shortages.

Daily-paid casual labourers struggled to find work as most people could not afford to hire them for work. Many of them also highlighted that, even when they managed to find work, the income was not sufficient to meet their household expenses. Increases in cement prices and the slowdown in the construction sector, as well as a decline in tourism reduced opportunities to seek casual work in these sectors.

“It is very difficult to find a job because people are not hiring workers for their work in this economic situation. Even if we find some work and get a daily payment, it is not enough to buy the children’s school supplies. They are so expensive.” (Male casual labourer, aged 41, Matara)

The adverse effects of the economic crisis on farmers have been much more complex than those experienced by other types of livelihoods. The ban on chemical fertilizer and agrochemical imports in May 2021, which was among the key contributors to

the economic crisis, had a substantial negative effect on the harvests and incomes of all farmers in the sample. The harvests were not sufficient with organic fertilizer which caused significant losses on their investments. The significantly higher prices of fertilizer, pesticides and vegetable seed compared to before the economic crisis compelled some respondents to abandon farming altogether or to cut down on the extent of land they cultivated. The rise in the cost of living amidst challenges to their livelihoods have exacerbated economic distress among households relying on agricultural income.

“The prices of essential inputs such as fertilizers, pesticides, and seeds have risen, sometimes reaching three times their previous cost. It’s becoming increasingly difficult to sustain our agricultural activities. Previously, I farmed on 10 acres of land, but now I am not sure how I can afford fertilizer and pesticide. Currently, I’m spending over 700,000 rupees on them. The cost of pesticides, which used to be 1,500 rupees, has now increased to 8,000 rupees. Fertilizer prices have also risen dramatically, with a bag costing 10,000 rupees at APS and 22,000 rupees outside, compared to just 2,000 rupees previously. Now a Moriyana capsicum seed packet is priced at 7,500 rupees.” (Male farmer, aged 53, Kilinochchi)

“We were the only group of people suffering from economic crisis from its start, unable to farm our lands due to the shortage of fertiliser and pesticides. Recently the government agreed to import fertilizer, but prices have increased rapidly. For instance, before one bundle of fertiliser was 1500 or 2,000 rupees. Not more than that. But now it is 10,000 rupees or more. We cannot do farming at such high costs. Even if we spend like that and cultivate, we will incur losses. So, nowadays many farmers do not engage in farming. They have given up. The economic crisis ruined our lives a lot more than the pandemic.” (Male farmer, aged 63, Badulla)

The handful of respondents in our sample with non-conforming sexual orientations and gender identities faced additional challenges, because they were vulnerable to exposing their identity in looking for extra income, thereby putting their safety at risk. They also pointed out that they either lived away from home to protect

their families from social stigma or were alienated from families, usually had limited financial support from family and relatives, and had a limited number of employment opportunities, which made it particularly difficult to meet their expenses during the economic crisis. One homosexual male respondent elaborated:

“This economic crisis has affected people like us very badly because we live a kind of hidden life. My birth place is Muthur, but I mostly live in Colombo where I can live without anyone’s interference. It is very hard to pay the rent and meet other basic needs because I am studying Law at the University of Colombo and I work part-time at a shop. I earn 15,000 to 20,000 rupees per month. My family also supports me financially. I get *Mahapola* at university. From all these sources, I am managing my needs. I do not live with my family and I do not visit them. They have enough income.” (Male undergraduate and part-time shopkeeper, aged 27, Trincomalee)

As with the pandemic, we observed numerous instances where intersecting vulnerabilities had aggravated household economic distress during the economic crisis. Clearly, households that were disproportionately burdened by the health and economic impacts of the pandemic appeared to be further impacted by the economic crisis. Although the impact of the economic crisis was predominantly channeled through the commodities market, the extent to which households were cushioned from this impact was still by and large determined by the livelihood strategies and incomes of respondents. People who had more stable jobs, several income sources and more predictable incomes were still able to manage better than respondents depending on single and sporadic income sources. For example, although the hyperinflation situation significantly diminished the purchasing power of incomes of the few government employees in the sample, many of them still fared better than households grappling with reduced incomes due to the crisis.

“Although we are affected by the economic crisis, it has not gotten to a point where we can’t manage. The cost of living has risen, and we now need to spend twice as much as we did before the crisis. Everyone in our household has government jobs, which allows us to manage these increased expenses. (Female Development Officer, aged 35, Jaffna)

The gendered impacts of the economic crisis are largely revealed in the coping mechanisms most households have adopted amidst a sharp increase in food and non-food expenditure. There were several examples of women foregoing nutrition, cutting down meal sizes and frequencies and not eating altogether to ensure their families were fed. Furthermore, we recognise in their narrative accounts, the stress and guilt of mothers with young children, about their inability to buy their children food, clothes and toys. They bear the disproportionate burden of finding alternative solutions to keep their children happy. Moreover, strategies to cut down electrical equipment is likely to have worsened the drudgery of women's unpaid care work. Although our interviews did not probe extensively into the nuanced impacts of the economic crisis, it is conceivable that some of the other adverse gendered experiences of the pandemic which were discussed above – such as domestic violence and harassment, and increased care burden of children and the elderly – persisted during the economic crisis.

3.4 Coping with vulnerability: strategies, support and recovery

3.4.1 Coping strategies

The pandemic and the economic crisis have compelled many households to adopt coping mechanisms in response to the numerous and complex impacts of these shocks. The coping mechanisms adopted during the pandemic can be categorised into three overarching dimensions – physical health, psychological well-being and economic conditions.

Nearly all respondents in the sample, along with their households, had actively adopted precautionary measures to mitigate the risk of contracting the COVID-19 virus. In addition to adhering to health guidelines established by the government, many respondents followed traditional home-based strategies to enhance their immune systems and minimise the risk of illness. These measures included steam inhalation several times a day, drinking hot water, coriander and herbal porridge, consuming roasted garlic and citrus fruit, and sprinkling turmeric water and hanging neem leaves at home to disinfect the environment. Some respondents started eating food prepared at home for safety and nutrition, adding more protein, vegetables and green leaves to their meals. Thus, we observed that nearly all health-

related coping measures that respondents had taken up were adaptive and positive for their physical and psychological well-being.

We observe that many respondents in our sample have taken up positive adaptive coping mechanisms, engaging in religious activities, practices and other rituals to manage the stress, fear and uncertainties of the pandemic. For some respondents, the religious practices were not pandemic-specific, but a part of their usual routine. Nevertheless, they acknowledged that engaging in religious activities at home provided them with a sense of peace of mind. While we did not observe distinct gendered patterns of ritual-based coping strategies, more male respondents, compared to female respondents stated that that they did not follow such practices during the pandemic.

“We didn’t follow any special rituals. We prayed every day to God for the country’s recovery and read the Bible every evening. This gave me peace of mind and confidence that Jesus will not abandon us.” (Female casual labourer, aged 22, Badulla)

“Engaging in religious activities at home helped me reduce my stress. I observed Sil at home and listened to *Pirith* and *Bana* to manage my mental stress. It was a great help to strengthen my mindset, especially in the second wave of COVID.” (Female farmer, aged 52, Kurunegala)

Only one respondent in the entire sample spoke of positive psychological adaption strategies during the economic crisis.

“I am living a happy life because I have found inner peace. The level of job-related stress hinges on how we manage it. Our economic situation and expenses are influenced by our salary. Nowadays, expenses have risen compared to earlier times, but how we manage the situation depends on our management skills and how we plan for the future. What we do in the present moment greatly influences our overall well-being.” (Male Public Health Inspector, aged 33, Kilinochchi)

We encountered a few maladaptive strategies men had adopted for coping with the psychological stress of the pandemic. As discussed earlier, men who suffered

adverse economic impacts due to the pandemic resorted to violence against their wives and children. A few men also channelled the frustrations of being confined at home on to the women living with them – wives, mothers and sisters. We also observed that some men spent the majority of their pandemic-induced time at home on recreational activities such as watching TV, spending time with children, playing games with neighbours, while women persisted in carrying out household chores without any support from them. A handful of men had resorted to increased consumption of alcohol, which occasionally resulted in petty fights and arguments with their household members. Children’s excessive use of electronic devices amidst school closures, and disruptions to their education and social interactions also emerged as a negative coping strategy that many parents struggled with.

The loss of employment, livelihoods, and reduced incomes has compelled households to take up measures to compensate for the shortfall of income. Several respondents who had lost jobs or incomes went out in search of alternative employment opportunities in the midst of the pandemic, even though such efforts put them and their household members at a heightened risk of infection. Many of them took up temporary work to finance their basic household needs. Several households took measures to cut down on unnecessary and luxury spending, such as eating from out, buying clothes, participating in social events, and going out altogether.

“We did not depend on a particular job. For example, I went fishing to earn an income and after some days, I went to my next village by bicycle to purchase fresh fish and sold it in my village at a reasonable price and I took some fish for meals of myself and my relatives. This is how I survived during the pandemic.” (Male shop owner, aged 43, Trincomalee)

“Before COVID, I used to buy a lot of food like *kottu*, shawarma and burgers for us. My mom likes shawarma a lot. But we cut down on spending on such food items during COVID.” (Male three-wheeler driver, aged 32, Colombo)

Many households have opted to liquidate their savings, and although this was not inherently a negative strategy, we observed several instances where such savings

withdrawals might have long-term negative effects. For example, one household had to take out savings that were earmarked for their children's education, while another household had to tap into the savings built up to finance the daughter's wedding. A large number of households also had to pawn their jewellery to meet their household expenses (Ekanayake & Amirthalingam, 2021). Some respondents had to pawn the only piece of jewellery they owned and some of them were compelled to pawn jewellery that was of sentimental value. For example, one respondent described:

“I don't have a lot of gold jewellery. But because we did not have money, during COVID, I pawned my jewellery. I will never forget the day when we pawned my wedding chain (Thali). It was very sad.” (Female cleaner, aged 41, Colombo)

The respondents' narratives crystallise that most households prefer using savings rather than pawning jewellery, and would not resort to the latter if they could find an alternative. We posit that this inclination may be rooted in the sentimental value attached to jewellery, potential impacts on the masculinity of the male breadwinner, perceptions of jewellery as an asset appreciating in value compared to savings, or the fear of being unable to reclaim jewellery if interest payments cannot be met.

“I did not have any savings because I could not save money while spending on my children's education. But my wife had jewellery. My last option was to pawn jewellery if I could not find a job. But fortunately, I got a job and my family members helped me till then.” (Male technical officer, aged 42, Kurunegala)

“I used my savings during the beginning of the pandemic. After a few months, we pawned my jewellery. No family member helped us because they also had many problems those days.” (Female casual labourer, aged 40, Kurunegala)

Several households benefited from financial assistance from family and relatives living abroad to cope with income losses. While a few households had been receiving such remittances regularly, others received financial support specifically

during the pandemic. Furthermore, several households sought assistance from family, relatives and friends in Sri Lanka. One respondent elaborated:

“During the COVID-19 pandemic, my friends provided significant support. Both friends living locally and abroad sent me money and essential goods. Additionally, relatives living abroad also helped us. Our neighbours provided us with invaluable support by giving us vegetables, which was a great support during the challenging period of the pandemic. Thanks to this support, we were able to manage our financial needs effectively during COVID-19. (Male teacher, aged 29, Kilinochchi)

A few agricultural houses also managed to use the produce from their home gardens, as well as the paddy, coconut and vegetable stock they had stored at home for household consumption. A handful of households benefitted from the pension income of retired parents and parents-in-law, which served to bridge the gap between income and expenditure. Thus, overall, savings, jewellery, and financial assistance from relatives, friends and family abroad and within Sri Lanka collectively offered some financial flexibility for many households in our sample that were grappling with income and livelihood impacts from the pandemic.

Poorer households with no or insufficient savings and jewellery, and without familial support, found themselves compelled to resort to more negative coping strategies. Many such households turned to borrowing to meet household expenses. A few common examples included taking loans from family, friends and neighbours and buying household necessities and dry rations on credit. Usually, they would settle these small loans with their *Samurdhi* incomes or social protection relief payments, or any income they received from temporary work. Some households trapped in the cycle of borrowing to finance household necessities had to resort to several rounds or sources of loans.

“Even though COVID is a shock to everyone, losing my job during COVID is still a shock to me. COVID is the main reason why my family and I are in this financial situation today. In 2020 and 2021, I was continuously unemployed. During the period of curfew, we kept borrowing from my brother and my wife’s brother. In 2021, I went to

work as a daily wage labourer when there was no curfew. For example, I did many odd jobs like lifting bundles, helping masons, packeting.” (Male courier messenger, aged 49, Colombo)

One respondent had to borrow from an informal financial organisation after she ran out of her own and her mother’s savings and the money from pawned jewellery. Another respondent heading her household had to sell her laptop in order to pay utility bills. She explained:

“I lost my income, and I didn’t have any savings but my mother sent me some from abroad. I pawned my jewellery when I didn’t have money for dry rations. Then, I sold my laptop because I had to pay 4 months’ electricity and water bills. I couldn’t ask from my mother always so I had no choice.” (Female nursery school teacher, aged 31, Badulla)

A few households picked up several of these adaptive and maladaptive income- and expenditure-based coping strategies to survive:

“During the most challenging times, we received some financial assistance from relatives living abroad, which helped us manage for a few days. After that, we resorted to pawning our jewellery to make ends meet. Our paddy stock provided some relief, and we also received support through the *Samurdhi* programme. Additionally, we had to take out loans.” (Male farmer, aged 53, Kilinochchi)

Food-based coping strategies to ameliorate the pressure on household economic situations were by and large negative. We observed that these strategies were almost exclusively adopted by households relying on informal non-agricultural incomes. In contrast, we observed that a few agricultural households in our sample had paddy, vegetable crops, coconuts and food from their home gardens to manage their food requirements. The most common food-based coping strategies included cutting down on food from outside and non-essential food such as biscuits and chocolates, reducing the quantity of food consumed, managing on inexpensive food or food that was freely available in the neighbourhood or their home gardens, and cutting down on the consumption of protein such as eggs, fish and meat. At its

extreme end, the only respondent with a disability stated that she ate stale food or drank water for dinner, as she could not afford to eat anything else:

“... during the COVID period, we have reduced the amount of food we buy and eat... My mother often used to cook me and my brother’s favourite meat. But during the pandemic, we did not buy meat that much. Since my brother’s income was our only income, we had cut back on buying meat.” (Male three-wheeler driver, aged 32, Colombo)

Usually, I cooked two cups of rice before COVID, but during COVID I cooked one cup of rice for me and my granddaughter. I managed our expenses this way. (Female casual labourer, aged 65, Trincomalee)

“The biggest responsibility was to find something for the children to eat since it was not possible for me to go outside and look for work. I would find some food [like manioc or breadfruit] from outside and bring home, which my wife would then boil and give to my children.” (Male casual labourer, aged 41, Matara)

“During that period [pandemic], I had no money. There were times when I had to sleep after eating stale rice, and sometimes I went to bed after only drinking water. (Unemployed female, aged 65, Kilinochchi)

Compared to the pandemic, the economic crisis has pushed far more households into resorting to much more adverse and desperate coping mechanisms to navigate the shock impacts. Many respondents have cut down on non-essential expenses and are much more cautious about spending. Most respondents have given up on going on holidays or eating out, and in general, as one respondent pointed out, “the things we enjoy.” In addition, most respondents are unable to think about savings amidst the increased cost of living.

A large majority of respondents have had to cut down on household expenses on essentials such as children’s education, transportation, clothing and food. While there was a general consensus among many households that they struggled to pay for their children’s education, a handful of them had been forced to cut down on educational expenses altogether.

“I have had to discontinue tuition classes for two of my children, although I previously paid for tuition of all four of my children. I am facing challenges due to uncontrollable expenses, and it is becoming increasingly difficult to sustain agriculture.” (Male farmer, aged 53, Kilinochchi)

“From this year [2022] I have stopped all my son’s tuition. He has to sit for his O/L exam next year. But now he has only school education. I can’t teach him because I am not much educated either.” (Female seamstress, aged 42, Colombo)

Several respondents have substituted using three-wheelers with public transport to cut down on transport expenses. A handful of households which previously relied on school transport services for their children had to transition to either walking to school or using public buses to cut down on spending on transport.

The use of food-based coping strategies to mitigate the impact of the increased cost of living amidst the economic crisis emerged quite strongly from respondents’ narratives. We also underscore the gendered burden of food-based strategies, as a few mothers discussed the guilt of not being able to provide the food their children loved. One respondent said:

“The economic crisis especially has put our lives into a miserable situation. A mother cannot let a child go hungry saying there is no milk powder in the market. Obviously, she should find an alternative solution for such issues.” (Female petty trader, aged 43, Trincomalee)

Although all food-based coping strategies that households have adopted were inherently negative, we also observed variations in the extent of the adversity of these measures. For example, one respondent from Trincomalee explained that instead of four eggs that she used to buy for her family of four, she bought only one egg. Another respondent, also from Trincomalee, pointed out that they managed to eat fish because fishing was their household’s livelihood, but most of their meals comprised only rice, fish and green leaves that grew in their compound. They could not afford vegetables such as carrots or beans. In some instances, respondents have been forced to change their staple meals. A female tea plucker from Badulla

said that, although flat-bread was the standard breakfast among estate sector workers, they had been compelled to switch to eating rice, as flour had become quite expensive. On the other hand, more extreme measures included a reduction in the number of meals consumed. While most respondents found it a struggle to eat three meals a day, there were a few households that had to cut down on the number of meals they consumed due to financial constraints. We also observed the gendered nature of these sacrifices, as reflected in the following quotes:

“We don’t even eat breakfast most of the time now because of the rising cost of things. I buy only one bun for my son to take to school. My mother and I eat only during lunch and dinner. By skipping breakfast for three people, we save money and it makes it possible for us to have lunch. (Female seamstress, aged 42, Colombo)

“We buy a small packet of milk powder and give to our children only. My wife and I do not drink tea. We cannot buy our children the food they like. We stopped buying bread because the price of bread was high. A shop next to our house sells parcels of dosa [a thin savoury crepe]. It has three dosa in it. They sell it for 140 rupees. Sometimes we buy two parcels of *dosai* with the money we would have to pay for a loaf of bread and give it to our children. We eat the leftovers after our children are done. I have seen that my wife does not eat sometimes because it is important for the children to eat.” (Male courier messenger, aged 49, Colombo)

“It’s been eight months since we stopped buying milk powder for my house. I also give plain tea to my son. We don’t have enough money to buy milk powder. And we have made a lot of changes to our food habits. Due to the economic crisis, we eat leftovers in the night. (Female cleaner, aged 41, Colombo)

“I learnt to live with what I have. I do not remember when I ate a good meal. Nowadays, I eat rice with one of the green leaves which grow in my garden.” (Female casual worker, aged 65, Trincomalee)

We also observed several coping strategies which involved reducing electricity usage. The electricity tariff hikes have led to a significant increase in monthly bills for many households. Several households have been unable to pay electricity bills for 3-4 months, resulting in Red Notices. A number of respondents mentioned that they had reduced the use of refrigerators and other electrical devices to avoid incurring high electricity expenses.

“We do not use any electrical devices such as our fridge, washing machine or the grinder at home now because electricity charges are very high. I still haven’t paid our electricity bill for 3 months. Now we have been given a Red Notice.” (Female seamstress, aged 42, Colombo)

We observed that only a handful of households turned to asset-based coping strategies during the economic crisis. In the entire sample, merely three households had pawned jewellery during the economic crisis. This could likely be attributed to the fact that most households had already pawned their jewellery to offset income shortfalls during the pandemic, leaving them with few or no assets when the economic crisis unfolded. This could also explain why none of the respondents mentioned using savings as a coping mechanism. In fact, what we discerned was that a handful of households had fallen into debt traps, constantly borrowing to meet household expenses.

“Several times I mortgaged jewellery or sold household assets to foot the expenses. For instance, I sold my fridge, TV and laptop computer too.” (Female nursery school teacher, aged 31, Badulla)

“Our salary is much less than our expenditure. I have pawned all our jewellery at pawning centres to find money for our expenses. We have also borrowed money from neighbours and relatives. We settle these loans once we get our salaries. It has become a routine practice now.” (Female teacher, aged 43, Trincomalee)

“My husband lost his business because of the economic crisis. He borrowed money from his friends and family for the business. He could not return the loan because his business made losses. So, he tried to go to abroad, and paid about 5 million rupees to the agency to

go to Canada. Unfortunately, that agency was a fake one and we lost our money too. Now the problem has increased and those who lent us money are asking for that money. My salary is just 42,000 rupees, and with this income I have to take care of the house and repay loans.”

(Female teacher, aged 28, Badulla)

3.4.2 Role of social capital

The role of social capital emerges as an important determinant of the extent and severity of the economic and social vulnerabilities that respondents faced during the pandemic and the economic crisis. Many households that did not have to resort to negative coping mechanisms from both shocks shared the common characteristic of being able to secure financial assistance of some form from extended family, friends, neighbours or their employers. As discussed in the preceding section, many respondents and their households relied on financial assistance received from abroad during the pandemic. In some instances, households have sought help from relatives and family living in Sri Lanka too. We came across one example where the landlord had reduced rent on the respondent’s house which was a significant support to her during the pandemic. Several respondents who were engaged in domestic and casual labour received financial assistance from their employers during the pandemic.

“During the pandemic, because of travel restrictions I was unable to go there [place of work] so I lost my income. But I think two or three times, I don’t remember exactly, my boss deposited 5,000 rupees into my bank account. They are very kind and they helped me several times. They helped me in the pandemic too.” (Female domestic maid, aged 28, Badulla)

“Many years ago, I worked in a house in Colombo, and I am still in touch with them. My boss is a businessman. He is Muslim, but he has helped me several times. During the pandemic also he called me and asked about my situation. I usually share everything with him, he is like a brother to me. Then, he deposited 10,000 rupees in my account twice. That was a very big help for me because I was struggling those days without any money in my hand”. (Male farmer, aged 45, Badulla)

Several respondents who were infected with the virus and were in self-isolation spoke of the help of extended family and neighbours in taking care of the rest of the household members, providing them with cooked food and dropping off groceries. A handful of respondents had also received help from co-workers when they were quarantined after testing positive for COVID. Several older respondents whose children lived in other parts of the country and could not visit due to mobility restrictions explained how neighbours bought them medicine from pharmacies and groceries from shops when curfews were lifted. Several respondents had resorted to connecting with their relatives and friends on the phone and online to combat the pervasive feelings of loneliness, isolation and anxiety that characterised the lockdown periods.

The importance of social capital for respondents that were hardest hit by the pandemic was explicit in many accounts. For example, the female respondent from Colombo whose husband succumbed to the virus infection received three months' salary for her late husband from her employer – a gesture she found particularly helpful during her traditional four months of seclusion following her husband's funeral.

“Even after my husband's death, my husband's employer paid us for three months. According to our Islamic custom, I did not come out for four months after my husband died. This income was very helpful during that time. In these months, people from the neighbouring house would also cook food for us. They took my son to the shop and bought things for him. My relatives also helped me by sending money. I would like to express my gratitude to everyone who helped me at this difficult point in my life.” (Female seamstress, aged 42, Colombo)

Conversely, households that had not received such assistance reported sentiments of marginalization and discrimination.

“I did not receive any help from my relatives, as my relationship with them was not good. Even my children did not care for me. It seems that people are more inclined to respect those who have money, and because I am disabled, I feel that I am often overlooked or uncared for.” (Unemployed female, aged 65, Kilinochchi)

Furthermore, several households that had contracted the virus during the initial stages of the pandemic, when public awareness about the pandemic was low, and health sector workers whose work brought them into direct contact with COVID patients also experienced discrimination from neighbours and communities.

There were also several examples of respondents from nuclear families who struggled to manage their household situation during the pandemic. For example, a few respondents who contracted the virus and were under quarantine found it challenging to care for their children in the absence of extended family or relatives nearby. Furthermore, we discerned a greater sense of isolation among respondents who lived far away from extended family and married children, even in cases where respondents felt financially secure.

The importance of friendships was underscored on several occasions. A few respondents who had lost jobs explained how their friends helped find jobs, set up and expand their businesses during the pandemic. The handful of respondents with diverse gender identities and sexual orientations made special mention of the importance of friends during the pandemic, as they were both physically and emotionally distanced from their families. Several respondents also stated that being unable to be with their friends at school and outside was difficult for children. Another example is of a woman who had taken refuge with a friend after she had run away from an abusive employer in Saudi Arabia. In another instance, a respondent's children managed to use a smartphone for their online education that one of her friends from abroad had gifted her. Importantly, we gleaned from some narrative accounts that relationships with friends were relatively straightforward, with no strings attached, unlike relationships with extended families, in-laws and other relatives, which tended to involve more expectations and complexities. For example, as one respondent explained:

“I have a good relationship with my friends and neighbours. But my relatives were a little upset with me because of my marriage.” (Female laboratory assistant, aged 35, Kurunegala)

However, unlike in the pandemic, extended family put a greater strain on household finances during the economic crisis, unless they could contribute to the household income through their pensions or savings. Furthermore, some respondents

explained that, as more people were facing economic hardships due to the economic crisis compared to the pandemic, they refrained from seeking financial assistance from their relatives or extended family, particularly if they had already sought help from them during the pandemic. Moreover, unlike during the pandemic, when mobility restrictions hindered respondents from visiting extended family, relatives and friends, in the economic crisis, respondents found themselves unable to afford such visits, despite being free to move about.

3.4.3 Institutional support and social protection programmes

Many respondents had positive reflections on how the government handled the pandemic situation at the initial stages. Most of them graciously acknowledged that the pandemic was a new experience for the government too and that the government did the best it could in the situation. A few respondents explained that the awareness creating campaigns were effective in helping them safeguard against the virus and in dispelling misconceptions they held about it. Several respondents shared positive experiences about the quarantine process that the government put in place. In fact, one respondent who had quarantined at a government-run facility likened the experience to a holiday.

“I didn’t feel that I was in a quarantine centre. It was like a resort for me. They cared for us very well. The food was also good; they gave fruit, yoghurt, chocolate for children. They even gave sanitary napkins to us and diapers for small children. So, I think the government did its best.”
(Female teacher, aged 28, Badulla)

Those who were quarantined at home appreciated the parcels of dry rations they received which they estimated was worth about LKR 10,000 at the time. Many of them recognised that it was more useful to get goods than cash as they could not go out to purchase anything anyway. Importantly, most respondents who had self-isolated at home mentioned that they received the dry rations package irrespective of their income or employment status, underscoring the consistency and proper targeting of the pandemic-specific support extended by the government.

However, dissent emerged among several groups of respondents regarding certain initiatives undertaken by the government to control the pandemic. First, households relying on livelihood strategies that require freedom of mobility, working in groups and physical presence considered the overnight imposition of lockdowns as an insensitive decision by the government. The poorest households that relied on daily wages to meet their incomes, had no savings or assets that could be liquidated fast, or had no relatives and friends who could assist them financially were the most affected by such abrupt measures. As one respondent expressed:

“When the government suddenly imposed lockdown in the country, we were the type of people who became most helpless. There must be a better solution, otherwise people like us will have to die of hunger.”
(Male casual labourer, aged 41, Matara)

Additionally, several respondents pointed out that the government did not adequately consider the challenges that people living in small flats, apartments, and congested slum areas would encounter when lockdowns and mobility restrictions were enforced. While a few respondents appreciated distractions provided by artists who performed musical shows for those confined to apartments, they reasoned that such measures were not effective in appeasing the psychological and economic stress they underwent at the time.

Secondly, several respondents emphasised that the sweeping decision to cremate all bodies of COVID-19 victims was insensitive towards the funeral traditions of Muslims. The only respondent who experienced a virus-induced death in the immediate family spoke at length about her emotional struggles about coming to terms with the hospital having cremated her husband’s body.

“The hospital management did not allow me to bury my husband after his death. They burned him. I still can’t accept this. We respected and followed everything the government and the health ministry advised us to do. The government should respect our sentiments during such times. I feel today that the government has broken my hopes.” (Female seamstress, aged 42, Colombo)

Finally, there was consensus among respondents that the government was much less stringent about health and safety measures in the second and third waves of the pandemic, which led to more confirmed cases and deaths from the virus. Many respondents noted that, although curfews and lockdowns were imposed, there was no effective mechanism to enforce them. In addition, a few respondents explained that the curfews imposed in the dead of night were not effective in controlling the mobility of the general public. The stringency of the quarantine process, along with the quality of government support to households in quarantine, had also gradually declined, leaving many sick people reliant on the help of neighbours and relatives. A few respondents were also critical of the mixed and contradictory messages coming from the health and defence ministries. A handful of respondents believed that the excessive military involvement in the pandemic control process led to ill-timed and inaccurate decisions about curfews, lockdowns and other safety measures.

“In the beginning, the government tried to control the pandemic well. But later it seems that it failed. The main reason for this was that these decisions were taken by security officials. It is difficult to control something like a pandemic when certain decisions that need to be taken in the health sector are taken by the military. At a time like this, priority should be given to the health sector. Other departments should operate under their supervision. Otherwise, it is difficult to control a pandemic.” (Male nurse, aged 40, Matara)

Most of the respondents in our sample recognised that the government’s vaccination drive was executed fairly equitably. At the time of our interviews, many of these respondents and their households had obtained at least two vaccination shots. Many respondents pointed out that the police, health officials and the *Grama Niladharis* were effective in creating awareness about where and when vaccination programmes would be taking place in their communities. Furthermore, a handful of respondents who had compromised respiratory conditions were prioritized by health officials to receive the vaccination.

However, many respondents complained that health officials failed to provide any information about the vaccination or about any side- or after-effects. Several respondents spoke about the confusions over the vaccine brands, post-vaccination health complications they themselves or relatives had experienced and a decrease

in confidence as vaccinated individuals contracted the virus. Most respondents chose to be vaccinated because it was compulsory. Many of them recognised that non-compliance would result in limitations on their freedom of mobility and access to physical spaces. Many respondents who had already received two doses of the vaccination refused to get the third without additional information.

“I have received all three COVID vaccinations. But I don’t know anything about it. My house owner where I work told me that I must get the injection as I am supposed to do work inside the house. I vaccinated myself to keep my job. I have no idea about it [vaccine]. Injections were readily available to all and were administered at many centres. However, if you ask anyone at a vaccination centre for information about it [vaccination], no one will say anything.” (Female cleaner, aged 41, Colombo)

“I think many of our villagers didn’t get the third dose. Some people said that, because of the vaccine people have developed many side effects and they are more likely to fall ill and also that the third vaccine caused heart attacks in some people. I don’t know the truth. Maybe it is a rumour. But many of us didn’t get the third dose due to fear”. (Male farmer aged, 63, Badulla)

The pandemic-specific financial relief from the government by way of two transfer payments of LKR 5,000 had been very helpful for all respondents who received it. A few respondents had only received the first payment. Many recipients found these cash gifts very helpful to purchase household necessities or to settle grocery shops from which they had bought goods on credit. Several other respondents had used it to pay rent and utility bills, and to buy medicine. The *Grama Niladhari* officers appear to have played an important role in ensuring that these COVID-relief funds were well-targeted. While there were delays in the disbursement of other transfer payments, including *Samurdhi*, Disability and Chronic Kidney Disease allowances due to the pandemic, several respondents confirmed receiving the stipulated amounts eventually. Many respondents pointed out that the grassroots level government officers were helpful and actively assisted them to obtain financial aid and other in-kind support of the government.

“*The Grama Niladhari* helped me in many ways, including connecting me with other organisations. Even when my own children isolated me, the *Grama Niladhari* supported me like my own son, and because of that, I could manage during the pandemic. They [*Grama Niladhari*, Development Officer and *Samurdhi* Officer] did not help only me, they extended their support to people like me and other individuals in need. Otherwise, many people might have suffered from hunger and died.”
(Unemployed female, aged 65, Kilinochchi)

A handful of respondents also benefited from moratoriums and grace periods offered by the Ceylon Electricity Board, banks and leasing companies, under the directives of the Central Bank of Sri Lanka, to settle past due amounts. Overall, any support that the government had extended during the pandemic – regular and COVID-19 specific social protection aid, dry rations, moratoriums, and government-financed quarantine processes – had created a positive impact on households that benefitted from them. Thus, it is important to acknowledge the government’s efforts to protect and safeguard the most vulnerable and poorest households from the adverse effects of the pandemic.

Nonetheless, many respondents pointed out that the social protection initiatives discriminated against many households that were struggling due to the pandemic. For example, all government employees were deemed ineligible to receive the LKR 5,000 allowance as pandemic relief. However, in the spectrum of government employees in our sample, there were skilled workers, such as nurses and teachers, who potentially earned a decent income, alongside unskilled workers, such as hospital attendants and municipal council workers, who received significantly lower salaries. Therefore, the exclusion of all government employees from the COVID relief programme evoked sentiments of disappointment among respondents, who felt that their economic struggles were being overlooked solely based on their employment in the government sector. Similar sentiments were echoed by respondents who were engaged in business activities and incurred income losses during the pandemic. Secondly, many respondents were critical of the ‘one-size-fits-all’ payment of LKR 5,000 offered as pandemic relief. The effectiveness of this relief payment was significantly influenced by the size of the household and its other economic characteristics. In other words, this money would have made a significant positive impact on a small household, while it might not have made

as much difference in larger households or those with higher medical bills or educational expenses.

There were some perceptions of biases and favouritism exercised by the *Grama Niladhari*, and poor targeting when the government's pandemic relief allowances were distributed. The few respondents with diverse sexual orientations and gender identities were critical of *Grama Niladhari* officers, alluding to the biases of government officials against this minority group. Instead, a safer option for them was to approach non-governmental organisations (NGO) for help. One respondent explained:

“We do not approach these persons [government officers including the *Grama Niladhari*] when we need help. We approach them through the NGOs that help us. They get our requirements fulfilled. So, during the pandemic I did not approach them for any help.” (Male undergraduate and part-time shopkeeper, aged 27, Trincomalee)

None of the respondents had received any financial support from non-governmental organisations, including religious institutions. However, several respondents had received dry rations, school supplies, medicine, and vegetables from NGOs. A few respondents pointed out that they had received dry rations from religious institutions in their communities. However, these religious institutions extended these in-kind benefits predominantly to households of their particular doctrine. One respondent pointed out that it would have been better if people were not discriminated against in such assistance, as people of other religions in their community were also struggling at the time. While a handful of respondents have received donations from affluent individuals in their communities, diaspora, local politicians and private companies, this type of support appears to be sporadic at best.

There is a conspicuous absence of any formal institutional support, whether from the government, NGOs, or religious institutions, in relation to the economic crisis situation. While respondents registered in social protection programmes may have continued to receive their monthly payments, hyperinflation is likely to have significantly reduced the real value of such transfer income. Thus, social protection and support had been unavailable to the most vulnerable households

when they had needed such assistance the most. As previously, many households had already pawned jewellery, depleted savings and sought assistance from their social networks during the pandemic, and had exhausted resources and avenues to tap into during the economic crisis, which put most of them in precarious financial conditions.

Many respondents underscored the importance of having a robust social protection mechanism that can support households in a meaningful manner. While most of them acknowledged the benevolence of the government during the pandemic, respondents also pointed out that relief measures, both cash and in-kind, should reflect the realities of each household. A few of them highlighted the importance of collecting and maintaining data about households on a regular basis, so that there are reliable sources of information to refer to at times of crises to assist the most vulnerable households. Several government sector employees and business owners pointed out that their economic distress should be assessed more humanely in crisis situations, as their struggles went unnoticed in the pandemic situation. The need to create and strengthen awareness about the rights of persons with diverse sexual orientations and gender identities, especially among grassroots level government officials, also emerged as a key recommendation. Importantly, some respondents pointed out that the government should prepare action plans to address potential economic shocks that would allow for proactive instead of reactive measures. Several narratives underscored the importance of fostering robust economic growth and efficiently managing the economy to enhance the country's resilience to external shocks.

A few important recommendations were also made in relation to responding to health emergencies. The importance of showing sensitivity to the challenges faced by poor households with irregular incomes before implementing essential but stringent precautionary measures such as lockdowns and curfews emerged strongly from the discussion. A few respondents pointed out that precautionary protocols should not cause distress or harm to people of different ethnoreligious communities. The importance of allowing health officials to address and take charge on health-related crises, providing relevant and accurate information about vaccinations, maintaining a consistent quality of service delivery by ground level health officials, and preparing strategies, standards and action plans and building

capacity of health sector workers to handle health crisis situations were also discussed.

3.4.4 Beyond crises: hopes, aspirations and positive takeaways

Many respondents in our sample did not have hopes and aspirations in their lives to begin with. In fact, most of them also had no pastimes or hobbies, while a number of them had not travelled for recreational purposes. Even before the outbreak of the pandemic, a handful of respondents had never gone on a vacation, while some had only travelled for the purpose of attending family functions. It is also evident that, even those modest aspirations or plans a few respondents have had, have now dwindled into a mere struggle for survival. For example, the main aspiration of a few respondents was to find a job. For several others, it was to settle their debt, and for a handful, the aspiration was to see the economy return to normal. A few respondents who have had aspirations – to buy a piece of land, three-wheeler, car, plastic shredder, to extend the home, build a kitchen – have had to divert the funds they had earmarked for these dreams in the struggle to survive the two shocks.

“I wanted to buy a car. I had saved some money for it when I was abroad, and wanted to save some more. But after the pandemic situation, I could not fulfill this dream. We had to use my savings to manage our household needs” (Male small business owner, aged 59, Colombo)

In contrast, however, most respondents with children or grandchildren had vague but positive aspirations for the younger generation. Many respondents concurred that they did not want their children to go through the economic hardships they have been forced to navigate due to the pandemic and the economic crisis. They were determined to educate their children and ensure that they were employed in government jobs or abroad. Many respondents expressed a desire to see their children pursue opportunities abroad for better economic conditions.

“My sons should complete their education successfully and secure good government jobs. Achieving these goals will require facing various challenges. A stable income is crucial for a better quality of life, and I hope that my children won’t have to struggle as my husband and I did.” (Female farmer, aged 48, Jaffna)

“My kids have to go to a good place in life in the future. I want to see them in high positions in the government sector. Then only they can live their life without any problems. That’s why I am educating them well from now on.” (Male three-wheeler driver, aged 42, Badulla)

Although, by and large the pandemic was a negative experience, for several respondents and their households, it still has yielded a few positive gendered outcomes. The lockdowns and curfews have given several women in our sample time and leisure to discover their passions, hobbies and pastimes. Several of them spoke of being able to read novels, watch movies and TV shows, engage in flower gardening, and spend more time on religious and spiritual activities. Some respondents also valued the time they got to spend with family members during lockdown. However, it must be noted that these outcomes were predominantly limited to households whose incomes were not significantly affected by the pandemic. In a few households, traditional gender roles were diminished as men and boys took up unpaid household chores like cooking, cleaning and washing. There were also several examples of husbands taking care of wives, children and household chores, when the wife contracted the virus.

“We performed household chores without assigning responsibility based on gender. We were equal partners. Throughout the pandemic, my family members and I collectively prepared and enjoyed a variety of foods. We all shared household tasks. During this period, I also took on the task of cooking.” (Male teacher, aged 29, Kilinochchi)

“I helped my mother with household activities. My brothers also helped me to cook. During the pandemic, my elder brother learnt to cook. (Female employee at a salon, aged 25, Kurunegala)

“My husband did all the housework during my quarantine period. My children were also helpful. Even after I returned home, my husband and children did not allow me to do any household work. They managed and took good care of me.” (Female petty trader, aged 43, Trincomalee)

For a few respondents, the pandemic was a catalyst to reevaluate their lifestyles and activate positive transformational changes. Some of them took advantage of the pandemic to prioritise their physical well-being and adopt healthier habits such as eating home-cooked meals and reducing the intake of junk food. Several respondents appreciated that, despite fears and uncertainties of the pandemic, they appreciated the time the lockdowns and travel restrictions accorded them to spend with their families. A handful of them spoke of gaining insights into each other's roles in the family, and developed a greater sense of understanding and better reciprocity. One respondent pointed out that he had gained a new perspective on life, which encouraged him to give more to those in need.

“It was a bad experience, but gave a good opportunity to rethink about life in a new way. We strongly felt that we want to help others as long as we are alive. Also, I understood about the uncertain nature of life. I think the pandemic experience is worth it because I was able to understand this. People in our village only received subsidy and food bags from the government, but they did not receive any other material things. I am inspired how people are motivated to help each other. They also practiced self-sustenance by eating food they found in the village itself.” (Male nurse, aged 40, Matara)

There were some positive livelihood impacts too. First, there were a few respondents who managed to expand and grow their businesses by adapting to the realities and demands of the pandemic. Several respondents who had lost their wage work had started new businesses during the pandemic. Although some of these businesses have ceased to exist, the experience created awareness among respondents about their own skills and alternative livelihood strategies.

“Challenges like COVID made it possible to start a new business. Now, we have stopped it. But it was that business that brought us income during the pandemic. I consider this a positive change.” (Transgender makeup artist and activist, aged 35, Colombo)

Several respondents have acquired skills that can help bring home an additional income or contribute to household needs. Several respondents have taken up home

gardening which produced a variety of vegetables that can feed their households, and fruit that can be sold. One respondent has learned handicraft work by following YouTube videos. Another respondent spoke of the grit and courage she exercised throughout the pandemic as her overall positive takeaway from the experience.

“The pandemic has taught me how to cope in life when we are pushed into poverty. It strengthened my courage to face life.” (Female cleaner, aged 41, Colombo)

4. Conclusion

“The COVID pandemic time is a haunting period in my life. I wish such a terrible time would not befall anyone ever again.” (Female seamstress, aged 42, Colombo)

4.1 Summary of findings

We analysed 72 in-depth interviews from a purposive sample of respondents in six districts to probe into the drivers of household socioeconomic vulnerability during the pandemic and the economic crisis in Sri Lanka. We found that not many respondents or their household members have contracted the virus. The handful of those who did have fully recovered at the time of data collection. Only one respondent in our sample has experienced the death of a household member due to the COVID-19 virus. A pervasive theme threading through all narrative accounts was the proactive measures households in our sample, even the poorest ones, implemented to strengthen their immune systems to mitigate the risk of contracting the virus. Although most respondents had taken both doses of the vaccination, many of them were skeptical about its benefits in protecting them against the virus. On the other hand, the psychosocial stress the pandemic had triggered featured prominently across the narrative accounts. The pressures of pandemic prevention measures put a strain on the social fabric, as revealed in the numerous accounts of how respondents grappled with isolation and loneliness, stigma, hopelessness, mental health challenges, and disruptions to normal social interactions.

Ironically, the most formidable catalyst of their vulnerabilities was rooted in the snowballing adverse effects of pandemic prevention protocols on livelihoods and incomes. The very measures aimed at curbing the spread of the virus, such as lockdowns, business closures, and travel restrictions, have given rise to a cascade of challenges, significantly impacting employment, livelihoods, education and financial stability, and exacerbating the economic burden. While the negative impacts on education were temporary for some households, they proved to be enduring and permanent among the most impoverished, potentially leading to long-term adverse effects on their household productivity and, likely contributing to their descent into intergenerational poverty. Respondents and their households who have had to straddle both the health and economic dimensions of the pandemic

have been rendered the most vulnerable, highlighting the intricate intersection of economic and social dimensions of vulnerability during these unprecedented times.

Quasi-liquid assets, social capital and government social protection programmes served as vital safety nets during the pandemic, helping many households cushion its impacts. A number of households liquidated their savings and pawned jewellery to make up for the shortfalls of income. Households that had friends, relatives and employers with financial means, and social connections were able to turn to them for both financial assistance and opportunities in employment and business. Thus, households endowed with financial, physical and social capital managed to refrain from seeking negative coping strategies for survival during the pandemic.

Numerous households who benefitted from the cash grants and in-kind assistance under the government's pandemic-specific social protection programme found the financial assistance very timely and valuable. For several households, these payments, along with the transfer incomes from the standard social protection programmes, constituted the largest, if not the only, source of income for many months during the pandemic. Comparatively, a much smaller number of households received some form of financial and in-kind assistance from non-governmental organisations. Nevertheless, the standardised nature of these social protection measures diminished their positive effect on larger households as opposed to smaller ones.

We find that the economic crisis has had far more devastating impacts compared to the pandemic. The adverse impacts of the economic crisis were experienced by almost all households universally, as each of them grappled with insufficient incomes to finance their household expenses. This was because, unlike the pandemic whose economic impacts were predominantly transmitted through the labour market, the shocks of the economic crisis reverberated primarily through the commodities market, mainly through hyperinflation, and, to some extent, through supply shortages. The decline in the real value of money set in motion a range of negative adaptation strategies which has led to a depletion of savings and assets, escalation in the drudgery of household work, debt traps, and other potentially long-term negative effects on human capital development. Among the worst off were households who were already grappling with marginalised pre-existing

conditions. We also posit that the economic crisis that immediately followed the pandemic crystallised the pandemic-induced transient poverty conditions among several households into longer-term poverty situations.

We observe that intersecting drivers of vulnerability and gendered inequities play a deterministic role in shaping the length, intensity and dynamism of household experiences during and in the aftermath of the pandemic and the economic crisis. Many households that contended with unfavourable pre-existing conditions such as poverty, disability, poor educational outcomes, informal livelihood strategies and occupations, non-conforming sexual orientations and gender identities, and other long-term systemic discriminations found themselves thrust further into economic destitution. The risks of entrepreneurship were vividly illustrated in the overnight closures and losses of most businesses. Permanent, waged and skilled employment associated with high educational outcomes showed the most resilience to pandemic-induced shocks. Although all households faced tight budget constraints in the economic crisis, households with monthly wages and pensions had more predictable cash inflows than others.

We highlight a few positive outcomes that emerged out of the pandemic and economic crisis. Many respondents have strengthened their resolve to invest in their children's education to help them break intergenerational poverty. For several others, the pandemic brought about a positive change in their perspectives on life. A few other respondents had acquired new skills and/or started new livelihoods, and learned more about themselves, about what they can achieve and their own grit. There were also several examples of positive gender behavioural changes among men and boys who learned to take on more unpaid care work at home.

4.2 Reimagining vulnerability in the light of the pandemic

Our findings align with the notion that vulnerability is inherently ambivalent, relative and context-specific. The magnitude of socioeconomic vulnerability is contingent upon a number of factors, including but not limited to the intensity and duration of the exogeneous shock. The transmission of the shock is largely influenced by the policy responses that a shock prompts, and the fiscal space available to the government to provide social protection against the impact of such shocks. At the household level, the capacity to endure a shock relies on its access

to physical, human, financial, and natural capital, along with the resilience of its livelihood strategies. At the individual level, factors such as age, education, gender identity and sexual orientation, economic status, physical and mental health, and ethno-religious identity can determine the extent to which a person is insulated from the impacts of the shock. Furthermore, we emphasise that there is no purely economic or purely social vulnerability. Instead, we observe a mutual reinforcement of these two dimensions, calling for a significantly broader understanding of what vulnerability to poverty constitutes.

Our analysis gives us a bird's eye view of vulnerability and leads us to recognise three distinct phases of vulnerability that demand varied efforts from both state and non-state development actors. The first phase is the set of pre-conditions that lay the groundwork for how fast and how deep households can plunge into socioeconomic vulnerability in the face of a shock. As discussed above, these pre-conditions refer to the diverse portfolio of assets and capital at the disposal of an individual and a household. Robust pre-conditions serve to fortify the metaphorical cushion encasement of a household, enhancing its ability to withstand the impacts of the shock.

The subsequent phase encompasses the first-hand encounter with the shock during which the government, international development actors and non-governmental organisations mobilise swiftly to provide financial and in-kind support to the most vulnerable households. This stage, which stands out as the most conspicuous and notorious part in the holistic experience of vulnerability, tends to be highly politically motivated and is subject to close observation, monitoring, research and critique.

The final phase is the recovery from the shock experience which should prioritise long-term considerations. Each shock offers valuable lessons to be learned and incorporated into various policy domains, including social protection, livelihood support, education, gender, disaster management, climate, and macroeconomic development. Therefore, the recovery phase should be utilised to enhance, modify or strengthen existing measures and mechanisms in place, to prepare for and recover from similar or more severe shocks in the future.

Thus, as we endeavour to reimagine vulnerability in the aftermath of the COVID-19 pandemic, it is critical to perceive vulnerability not merely as an isolated outcome following an exogenous shock, but rather as a continual and ongoing dynamic process influenced by a complex vector of structural, systemic and proximate factors. By acknowledging and analysing their interplay, policymakers, development stakeholders and communities can develop more effective strategies to reduce vulnerability over time.

Aligned with the three phases outlined earlier, we delineate three pillars within the realm of policymaking, aimed at systematically empowering individuals and households to withstand vulnerabilities arising from socioeconomic impacts of shocks. The first pillar of policies should be those addressing structural inequalities, such as disparities in regional economic growth, income distribution, quality of education, healthcare, infrastructure and access to finance. These policies are central to strengthening the pre-conditions of individuals, households and communities, thereby bolstering their preparedness in the face of external stressors and their ability to resist and mitigate the negative impacts of such shocks. As we consistently observed in our sample, pre-existing conditions are the buffers that help absorb the impacts of the shock, and therefore play the most deterministic role in how households navigate and recover from a crisis.

The second pillar of policies is aimed at strengthening social protection measures and safety nets, the government's emergency preparedness and response mechanism, disaster management, and ensuring seamless access to emergency services such as medical care, rescue, evacuation and other critical support services, which are essential steps for bolstering household and community resilience in the face of unforeseen stressors. In essence, such policies act as a safeguard for the most vulnerable and impoverished as the stressor unfolds, generously support them to survive the impact of a shock and recover in its immediate aftermath, and systematically promote their empowerment in the long run. Thus, the second pillar of policies should be conscious of not just the immediate support and interventions for individuals, households and communities that have been adversely affected by a shock, but also the medium and long-term assistance that can help them build their lives back better.

The third pillar of policies would encompass those that aim to address systemic fault lines that tend to manifest in policies, practices, norms and values within the institutional framework and hinder equal opportunities and access to resources, education, employment, and social services. This pillar is crucial for fostering inclusivity and dismantling barriers to equitable participation in society. It is also important to point out that these policies, while collectively exhaustive, are not mutually exclusive, and must be developed, refined and implemented in a holistic manner. Moreover, each shock experience provides a rich pool of knowledge to help improve all three policy pillars we discussed which state and non-state development actors can use to continually engage with the concept of vulnerability in the light of each such event.

Thus, in a post-COVID environment, reimagining vulnerability is very much about making a proactive effort to minimise vulnerability, by way of strengthening rights, inclusion and equity. It requires the policy environment to be alive, dynamic and closely interconnected across sectors, open to learning and adapting to new experiences, and evolving in tandem with emerging challenges and changing circumstances. Most importantly, the concept of vulnerability should not be relegated to crisis moments, but should rather be consistently taken into account and addressed, even during periods of relative calm and stability, and operationalised in a forward-thinking and anticipatory manner to ensure sustained resilience. In the final section of this report, we reflect on the policy implications in the light of these considerations.

4.3 Policy reflections

Social protection programmes play a pivotal role in protecting the incomes of the poorest and most vulnerable segments of society during crisis situations and need be strengthened both in terms of targeting and generosity, as well as their ability to pull people out of income and multi-dimensional poverty. We found that the cash transfers received from the government were invaluable to households to purchase their essential foods and medicine, to pay off borrowings, and to support their household members. Similarly, the in-kind support has benefitted both poor households and households in quarantine who could not access shops to purchase dry rations. However, a critical area for improvement lies in discarding ‘cookie cutter’ model solutions that, at a bare minimum, fail to take into consideration

differences in the household sizes. To achieve this, the government has to invest in maintaining both detailed and up-to-date databases of members of social protection programmes. Grassroots level government officers can be mobilised to systematically collect this data. Such databases can then be utilized by the government to design well-informed social protection measures, enhancing the effectiveness of support for recipients and ensuring fiscal efficiency through proper targeting. Additionally, enhancing the disbursement mechanisms for cash transfers will minimise human involvement, thereby reducing risks of biases, misappropriations and favouritism that are often associated with such benefits.

The newly devised national flagship social protection programme *Aswesuma* appears to address several key drawbacks of its predecessor *Samurdhi*, by approaching poverty from a multi-dimension perspective, targeting a smaller group of poorest and most vulnerable beneficiaries with more generous cash grants over a limited period of time, with annual assessments to ensure that targeting is effective. However, these social protection programmes should be coupled with plans to strengthen livelihood strategies and skills of recipients, and enhance their knowledge on managing household finances, budgeting, saving and building assets, which will be critical to minimise the risk of these households sliding back into poverty when they move out of the programme. Packaging this programme with strategies to raise awareness among recipients on additional topics such as climate change, health and nutrition, gender equality, ethnoreligious coexistence and human rights, including those of persons with disabilities and those with diverse sexual orientations and gender identities, will enhance the overall impact and inclusivity of the programme.

Policy responses to address external stressors should not come at a debilitating economic cost to citizens. Specifically, policy decisions that have a direct negative impact on people's livelihoods and incomes, especially of falling outside the realms of decent jobs, should be implemented systematically and with well-established arrangements in place. While most respondents acknowledged that, during the pandemic, the government did its best to handle a hitherto unexperienced situation, we emphasise the importance of deriving lessons from these experiences. Extreme measures such as lockdowns, curfews and mobility restrictions should not be implemented abruptly, as most individuals and households need a reasonable lead time to sort their affairs to adjust to such measures. Even if such abrupt actions are

required, the government should put in place proper mechanisms that can help households transition into new realities.

We also draw attention to the non-economic effects of social isolation measures, such as psychological strain due to isolation, disruptions in healthcare access, changes in lifestyle behaviours, and challenges in maintaining social connections. Recognising the complexities and interconnectedness of the impacts of drastic policy decisions is crucial for devising both immediate and long-term consequences of external shocks. Putting together a task force involving multiple ministries is crucial for more well-rounded policy responses, preventing the exclusion or further marginalisation of pockets of individuals in crisis situations.

Preserving and upholding the right to information is important in empowering and strengthening the buy-in of the general public during crisis situations. We observed that many respondents had obtained the COVID-19 vaccination because non-compliance effectively threatened their access to spaces. In addition, many of them pointed out the reluctance among government officers, including health officials, to provide further information about the contents of the vaccination, the brands, the effectiveness against contracting the virus and potential side and after effects of the vaccination. There were also examples of confusion where households received contradictory information from health and military officials. The rash decision to cremate expirations due to the COVID-19 virus had further disempowered persons who had to also grapple with the loss of loved ones.

The importance of differentiating between poverty and vulnerability is critical for fostering policy outcomes that strengthen short-term resilience in individuals and communities against external stressors, while also building long-term fortitude against poverty. Poverty is a persistent state of economic deprivation, and requires long-term interventions designed to pull them out of these conditions. Moreover, poverty is an observed and quantifiable phenomenon, which allows for the designs of interventions using readily available, fairly reasonable and robust data. At the same time, poverty reduction initiatives inherently contribute to reducing household vulnerability to poverty.

Unlike poverty, vulnerability is an unobserved phenomenon that represents exposure to risks that can lead to negative outcomes. Thus, by its very nature,

vulnerability is a broader concept than poverty that should encompass a wide range of policies aimed at reducing the risks of vulnerability in the event of a shock, providing support and protection for those who are vulnerable in the face of a shock, and strengthening recovering in the aftermath of a shock. Thus, addressing vulnerability demands targeted measures that mitigate short-term risks, but also extend to addressing long-term systemic fault lines. While some of these measures may overlap with policies aimed at poverty alleviation, the focus extends beyond addressing economic deprivation alone.

By highlighting this distinction, policymakers can tailor interventions to address the specific needs of each of these two categories. For instance, poverty-alleviation programmes may focus on uplifting economic conditions, while vulnerability-targeted measures can provide a safety net during crises. Recognising these nuances enables dynamic policy responses that adapt to changing socioeconomic conditions. Moreover, it optimises limited resource allocation, ensuring that assistance reaches those most in need. This differentiation contributes to building both short-term resilience against shocks and long-term resilience against persistent poverty, fostering more comprehensive and sustainable policy outcomes.

The pandemic- and economic crisis- led experiences of vulnerability offer important lessons for the future. These experiences have also opened up the space to look at other types of risks that can exacerbate vulnerabilities – natural disasters, extreme weather conditions, climate change and heat stress, domestic violence and sexual harassment, to name a few. The policy frameworks in relation to these stressors should be re-evaluated and strengthened in the light of Sri Lanka’s recent experiences.

We also highlight the importance of fostering a rights-based and pro-poor economic growth and strengthening the quality of and equitable access to education, healthcare, financial services and labour market opportunities. These comprehensive measures play a pivotal role in strengthening individual resilience in the face of diverse shocks. As the world confronts increasing risks of polycrises, prioritising these strategies becomes even more critical. Applying an intersectionality lens in policy design, implementation and monitoring is imperative to ensure that no one is left behind, a commitment enshrined in Agenda 2030.

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Reimagining Vulnerability in the Light of Covid-19: A Qualitative Study

Ranmini Vithanagama

We analyzed 72 in-depth interviews to examine experiences of household socioeconomic vulnerability during the pandemic and the subsequent economic crisis. We find that the pandemic had a significant negative socioeconomic impact on many respondents amidst loss of employment, livelihoods, and incomes, collapse of spatial outlines, radical changes to lifestyles, and resultant psychosocial stress due to pandemic prevention measures, disruptions to children's education, and enduring economic uncertainties. The economic crisis had more intense and widespread adverse effects among the respondents due to the sharp erosion of the real value of money. Many resorted to negative coping mechanisms with discernible gendered disadvantages. The worst affected were those with unfavorable pre-existing monetary and non-monetary conditions. Strengthening the generosity and effectiveness of social protection programs and enhancing emergency response policies are critical for minimizing the negative impacts of external shocks. Inclusive and equitable access to education, health, employment, and economic opportunities through a rights-based and pro-poor policy environment are essential for strengthening long-term resilience to external shocks. Importantly, the notion of vulnerability should not be confined to crisis situations or a specific group of individuals and communities but should permeate through and actively feature in short, medium, and long-term policy actions and development plans.

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