



UNITED NATIONS
KYRGYZ REPUBLIC



REPORT ON THE RESULT OF A SURVEY ON THE IMPACT OF COVID-19 ON YOUTH IN KYRGYZSTAN

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July 2020



TABLE OF CONTENTS

List of abbreviations	2
List of diagrams	3
Key findings and recommendations	10
Introduction	13
Methodology	15
Description of collected data.	
Awareness and protective measures	24
Awareness	25
Sources of Information	27
The level of preparedness to life during pandemic	29
Protective measures	31
Current psychological state	32
Changes in life after the COVID-19 outbreak	39
Relationship with family members	43
Household duties	46
The educational process	48
Income and labor activity	55
Unemployed	63
Skills and types of support	67
Access to healthcare	69
Challenges and awareness of getting help	73
Domestic violence	74
Civic engagement	78
Desires, expected aid	83
Conclusions and recommendations	89
Appendix 1. Survey questions	92

LIST OF ABBREVIATIONS

COVID19	CoronaVirus Disease - 2019
ES	emergency situation
GPS	Global Positioning System
ILO	International labor Organization
KR	Kyrgyz Republic
MLSD	Ministry of Labor and Social Development
OHCHR	United Nations Office for the High Commissioner for Human Rights
NGO	non-governmental organization
NSC KR	National Statistics Committee of the Kyrgyz Republic
NT	National Testing
SPSS	Statistical Data Processing Software “Statistical Package for the Social Sciences”
WHO	World Health Organization
UN	United Nations
UNDP	United Nations Development Programme
UNICEF	United Nations Children’s Fund
UNFPA	United Nations Populations Fund

LIST OF DIAGRAM

Diagram 1. Distribution of COVID-19 by age, cases (as of June 21, 2020)	14
Diagram 2. Number of youth in the age of 15 to 29 years as of the beginning of 2018 by type of settlement.	15
Diagram 3. Proportional distribution of the sample by age categories	17
Diagram 4. Sample distribution by type of sample, persons	17
Diagram 5. Number of respondents per province	19
Diagram 6. The number of respondents by sex and age	19
Diagram 7. Number of collected questionnaires by province	19
Diagram 8. Ratio of sample by number of urban and rural population to sex of respondents by provinces	21
Diagram 9. Correlation of sample by nationality and gender of respondents	22
Diagram 10. Ratio of sample by age and gender of respondents	22
Diagram 11. Sample education ratio by gender of respondents	22
Diagram 12. Ratio of sample by marital status by gender of respondents	23
Diagram 13. Ratio of sample by employment in respect to gender affiliation of respondents	23
Diagram 14. Distribution of answers by type of information received, in %	25
Diagram 15. Correlation between the level of education and the level of awareness in different topics, in %	26
Diagram 16. Distribution of answers among vulnerable groups by type of information received, in %	27
Diagram 17. Distribution of answers about useful information sources, in %	28
Diagram 18. Distribution of answers about the usefulness of different sources of information among vulnerable groups, in %	28

●	Diagram 19. Correlation between the sexes on coronavirus outbreak preparedness, in %.....	29
●	Diagram 20. Dependence of young people on parents by gender and age, in %	30
●	Diagram 21. Preparedness of vulnerable groups to Coronavirus outbreak, in %	30
●	Diagram 22. Distribution of answers about protective measures, in %.....	31
●	Diagram 23. Correlation between sex and use of protective measures in the last 7 days, in %	32
●	Diagram 24. Distribution of responses among vulnerable groups on protective measures, in %	32
●	Diagram 25. Current psychological state of respondents, in %	34
●	Diagram 26. Distribution of answers by gender on the question of calmness, in %	35
●	Diagram 27. Distribution of answers by gender and by age on the question of calmness, in %	35
●	Diagram 28. Distribution of answers by gender to the question of self-perception during shopping, in %	36
●	Diagram 29. Distribution of answers by gender by the question of future confidence, in %	36
●	Diagram 30. Gender distribution of answers related to connection with peers, in %	37
●	Diagram 31. Distribution of answers by sex and age on the question of communication with peers, in %	37
●	Diagram 32. Work/study workloads by urban and rural population	38
●	Diagram 33. Current psychological state among vulnerable groups, in %	38
●	Diagram 34. Distribution of responses on the impact of pandemic on lives of respondents, in %	40
●	Diagram 35. Correlation of responses on the impact of coronavirus, by gender, in %	40
●	Diagram 36. Correlation of responses on the effect of coronavirus, by gender and age, in %.....	41

●	Diagram 37. The impact of coronavirus on vulnerable groups, in %	41
●	Diagram 38. Differences in the perception of changes by type of location, in %	42
●	Diagram 39. Distribution of responses on impact of quarantine on the family relationships, in %	43
●	Diagram 40. Correlation of answers on family relationships, by gender, in %	44
●	Diagram 41. Changes in family relationships, gender differences, in %	45
●	Diagram 42. Distribution of responses on relationship with family members among vulnerable groups, in %.....	44
●	Diagram 43. Distribution of answers on changing the number of household duties during quarantine, in %	46
●	Diagram 44. Differences in changes by gender and type of location, in %	46
●	Diagram 45. Differences in changes by gender and type of location among working persons, in %	47
●	Diagram 46. Differences in changes by gender and type of residence among working and students, in %	47
●	Diagram 47. Changes in the educational process, in %	48
●	Diagram 48. Changes in the educational process by type of locality, in %	49
●	Diagram 49. Learning process in quarantine period, in %	50
●	Diagram 50. Learning process during quarantine by gender, in %	51
●	Diagram 51. The effect of household duties and access to technology on learning during quarantine, by gender and place of location, in %	52
●	Diagram 52. Distribution of answers according to the effect of quarantine on academic performance, in %	53
●	Diagram 53. Changes in academic performance during quarantine, by gender in %	53
●	Diagram 54. Changes in academic performance, by type of location, in %	54

●	Diagram 55. Distribution of answers according to plans for summer, in %	54
●	Diagram 56. Distribution of answers on changes in family income since the outbreak of coronavirus, in %	55
●	Diagram 57. Correlation of changes in family income by answers, by gender, in %	55
●	Diagram 58. Changes in family income, by age, in %	56
●	Diagram 59. Distribution of answers on changes in labor activity, in %	56
●	Diagram 60. Correlation of income and work activity, in %.....	57
●	Diagram 61. Correlation of changes in labor activity by gender, in %	57
●	Diagram 62. Correlation of changes in work activity, by place of location, in %	58
●	Diagram 63. Distribution of responses on concerns about the future of their work due to outbreak of coronavirus, in %	58
●	Diagram 64. Correlation of concerns about the future of their work due to the coronavirus outbreak, by gender, in %	59
●	Diagram 65. Concerns about the future of their work due to the outbreak of coronavirus, by age, in %	59
●	Diagram 66. How do you plan to recover your income after the pandemic? In %	60
●	Diagram 67. How do you plan to recapture your income after the pandemic? By gender, in %	60
●	Diagram 68. How do you plan to recover your income after the pandemic? By place of residence, in %	61
●	Diagram 69. How did you and your family's income changed since the start of the coronavirus outbreak? In %	62
●	Diagram 70. How has your work activity changed since the spread of COVID-19? In %	62
●	Diagram 71. Reasons for lack of job at the survey period, in %.....	63
●	Diagram 72. Reasons for lack of job at the survey period, by gender, in %	64
●	Diagram 73. Sources of income of your family, in %	65

●	Diagram 74. What are your plans after the pandemic? In %	65
●	Diagram 75. What are your plans after the pandemic? By gender, in %	66
●	Diagram 76. Reasons for representatives of vulnerable groups do not work at the moment, in %	66
●	Diagram 77. What measures of support will allow you to have more opportunities in the labor market after pandemic, including start of own business? In %	67
●	Diagram 78. What measures of support will allow you to have more opportunities in the labor market after the pandemic, including to start own business? By gender, in %	67
●	Diagram 79. What skills do you want to acquire to have more opportunities in the labor market? In %	68
●	Diagram 80. What skills do you want to acquire to have more opportunities in the labor market? By gender, by age, in %	68
●	Diagram 81. What support measures will allow you to have more opportunities in the labor market after the pandemic, including to start own business? In %	69
●	Diagram 82. If necessary, did you seek medical assistance? In %	69
●	Diagram 83. Have you or someone you know experienced difficulties in accessing medical services?	70
●	Diagram 84. The services of doctors, most difficult to access after the outbreak of the coronavirus, in %	70
●	Diagram 85. Sources of information on sexual and reproductive health and rights, in %	70
●	Diagram 86. Sources of information on sexual and reproductive health and rights, by gender, in %	71
●	Diagram 87. Distribution of answers of vulnerable group on necessity for medical care, in %	71
●	Diagram 88. Distribution of answers of vulnerable groups on access to medical services, in %	72
●	Diagram 89. The services of doctors, most difficult to access for vulnerable groups during the coronavirus outbreak, in %	72
●	Diagram 90. Sources of information on sexual and reproductive health and rights, in %	72

●	Diagram 91. Challenges during pandemic, in %	73
●	Diagram 92. Challenges during a pandemic among vulnerable groups in %	74
●	Diagram 93. Distribution of responses about domestic violence, in %	74
●	Diagram 94. Do you know where to go for help and support if you or someone else is subject to domestic violence?	75
●	Diagram 95. Do you know the hotline numbers in case you or someone is subject to domestic violence?	75
●	Diagram 96. What hotlines do you know?	75
●	Diagram 97. Would you seek help if you suffered from domestic violence?	76
●	Diagram 98. Distribution of answers by addressability by gender, in %	76
●	Diagram 99. Where would you go if you suffered from domestic violence?	77
●	Diagram 100. Distribution of responses on possible appeal in case of domestic violence among vulnerable groups, in %	77
●	Diagram 101. Civic engagement of youth, in %	79
●	Diagram 102. I sew and distribute masks, personal protective clothing, donate/collect donations for medical equipment and assistance to hospitals, doctors, by gender, in %	80
●	Diagram 103. I bring food, medicines, provide information about the pandemic, contact someone in need by phone and /or the Internet, etc., gender, gender, in %	80
●	Diagram 104. I often contact my friends, family and other close ones to find out how they cope with the current situation, by gender, in %	80
●	Diagram 105. I am an active member of an NGO / youth organization/youth initiative group that supports people who need help in time for COVID - 19, by gender, by age, in %	81
●	Diagram 106. Has the amount of time you devote to volunteering changed since the outbreak of COVID-19?.....	81
●	Diagram 107. Has the amount of time you devote to volunteering changed since the outbreak of Covid-19? The number, by gender, in %.....	82

●	Diagram 108. Civic engagement of vulnerable youth, in %	82
●	Diagram 109. If you had capacity and optimal resources, what would you want to do to support yourself and others during the COVID-19 pandemic? Number of respondents, in %.....	84
●	Diagram 110. What support do you and your communities need to better cope with the COVID-19 pandemic? Number of respondents, in %	85
●	Diagram 111. What online learning format would be effective for you? In %.....	85
●	Diagram 112. Online and offline learning needs. By age, living area, in %.....	86
●	Diagram 113. What online learning format would be effective for you? By gender, in %	86
●	Diagram 114. What online learning format would be effective for you? By area of living, %.....	87
●	Diagram 115. Ways for UN agencies to share information and provide support during the COVID-19 pandemic, in %	87
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KEY FINDINGS AND RECOMENDATIONS

This report presents the results of a survey conducted among urban and rural youth and adolescents on the impact of COVID-19 on income, work and employment, social protection, education and health, as well as the psychological state of young people. The report looks at the impact of youth challenges and problems caused by the pandemic from a gender and age perspective. In addition, data on vulnerable groups are presented separately, which include young people living with HIV/AIDS, those with limited health opportunities, and children of migrants. The main research tool was a quantitative survey of young people aged 15-29 years. The data collection took place from 3 to 13 June 2020 and covered all regions of the country.

The main conclusions of the study are as follows:

- The COVID-19 pandemic has had a negative impact on income, employment, including unpaid domestic work, psychological state and education of youth.

- More than half (60%) of young people and adolescents experience a high level of anxiety. The anxiety is related to concerns about the health of their loved ones, especially their parents, as well as anxiety about the future in the country and uncertainty. High levels of anxiety have been noted among rural youth, as well as those above the age of 24 years. In addition, girls are more concerned about the future and are taking more protective measures. According to young people, the main and important factor in this situation is the availability of reliable information. At the same time, the information received from close relatives and official sources of information is the most reliable. The pandemic has exacerbated existing inequalities and exposed vulnerabilities in social security systems and economic activities, particularly affecting girls and young women, as well as persons with disabilities and other vulnerable groups.

- The pandemic has not significantly aggravated the situation in the sphere of domestic violence for the youth, however, the awareness of

the youth about domestic violence and ways to combat it is at the average level. At the same time, the growth of indicators of domestic violence among vulnerable groups is slightly more intensive; however, there is a gap of almost 40% between the violence indicators obtained from respondents and the indicator of 65% measured on the country level.

- Young people have enough information about possibilities of infection and protective measures. Almost a third of young people who were seeking medical assistance during the pandemic were unable to receive it due to transport restrictions, lack of medical services in walking distance or other reasons related to physical access to medical facilities. The assistance of specialized professionals also remained difficult to access for a significant proportion of respondents. Proportionally, girls experienced slightly more difficulty than boys in accessing therapists and health professionals. Dentistry is an exceptional field in which both sexes suffered equally from the restrictions imposed.

- In general, the results of the study are comparable to the situation in other countries, and the global economic crisis will significantly aggravate the situation of young people in the long-term perspective.

Under the current circumstances, based on the survey results it is recommended:

- Work out an information and communications strategy for the rapid delivery of accurate and understandable information about the pandemic, protection methods and actions by the authorities. At the same time, it is necessary to use not only communication channels popular among young people (Internet, messengers), but also consider traditional channels to reach older members of their families (TV, radio);

- to develop a clear, logical and consistent government strategy for protecting society from the pandemic, with a variant combination of different protective and incentive quarantine measures;

- to legalize and regulate distance education using online teaching technologies;
- to develop a state program of preferential lending, credit and tax holidays for small and medium businesses, to encourage banks and financial institutions to do so;
- to formalize social entrepreneurship with tax benefits;
- develop and implement a program of professional re-training of young people in digital specialization and IT-technologies;
- stimulate the attraction of external and internal investors and donors to support small and medium-sized businesses, business incubators, startups, hackatons, etc.;
- develop a program to provide comprehensive consultations, information, legal online assistance from doctors, psychologists and lawyers regarding medical, psychological and legal protection and support of the population during the pandemic.

In conditions of uncertainty and global economic decline, these recommendations should be considered at the government level of the of the Kyrgyz Republic, with a review of the effectiveness and functional load of ministries and agencies. This should also involve civil society organizations and international organizations. Given the subsidized nature of State support for young people, it is not possible at this time to form specific recommendations for each individual agency. The crisis caused by the COVID-19 pandemic has exposed and exacerbated the underlying problems of public administration in the country, the relationship between the authorities and society, including all public institutions. The effectiveness of further action to improve the situation of young people in the country largely depends on the coordination and communication activities of all actors in the public and civil sectors. Only this cooperation and coordination can ensure the timely use of resources, given their limited availability.

Due to the rapid aggravation of the morbidity, the coordination work aimed at timely and objective assessment of resources available to government bodies, local authorities, international organizations and civil society institutions becomes particularly relevant. It is necessary to do timely and realistic assessment of who and what can do, as well as which institution can quickly respond to emerging threats.

While previous recommendations, as well as the need to distribute stakeholder recommendations as a result of further consultations, remain valid, the situation dictates other measures that are essential. These measures may require significant efforts in the area of social behaviour change. Some measures can as well generate significant tension and potential conflicts, but they are necessary to save as many lives as possible.



Additional study of sources of exposure, including study of transmissibility during funeral activities. State and local authorities must urgently develop a protocol for the burial and safe processing of the bodies of the deceased during the burial.



In large cities and towns, where there is an acute shortage of land for cemeteries, or cemeteries are located at underground water outlet points and are subject to erosion, the transfer of cemeteries and the construction of crematoriums should be considered. The local authorities, together with the Ministry of Health and Government representatives, should review such initiatives and determine how likely they are to be implemented and what measures should be taken prior to commencing work to mitigate the potential for conflict as much as possible.



The construction of hospitals and pharmacological plants (increase of production volumes for existing ones) should become the first priority for all state and local authorities. Given that WHO predicts at least another 2 years of pandemic, the population should be assured that they are provided with locally produced medicines and tests of good quality. Such confidence can, in itself, significantly reduce the level of social stress and contribute to changes in social behavior (for example, the transition to digitalization of business, development of logistics services, etc.). The pandemic has released quite large investment resources, according to Harvard Business Review and Forbes. There is a high chance that Kyrgyzstan may receive investments for construction and development of pharmacological plants, perhaps not on the most favorable terms for itself, but the very fact of receiving funds remains real. The problem with attracting personnel can be solved by inviting specialists from other countries with the help of appropriate negotiations through diplomatic channels.



Develop protocols for visiting public places, taking into account the long course of the pandemic, as well as an adaptive plan for introducing/removing restrictions in case of detection of the source of the disease in a particular location (for example, Bishkek or any village). Restrictions should be variable and introduced within the period from 1 week to 3 months.

INTRODUCTION

The world is facing a global health crisis that is affecting all sectors of society and changing lives and livelihoods. Experience in all types of crises, from climate change to armed conflict or political unrest, has shown that young people and youth organizations are quick to act and respond to the needs of others. As our monitoring shows, the same is happening now during the COVID-19 pandemic.

While attention is now being paid to those most affected, there are many signs that the COVID-19 pandemic will have lasting social, cultural, economic, political and multidimensional consequences for all societies, including young people, as highlighted in the Secretary-General's report on «Shared responsibility, global solidarity and development»¹.

The International Monetary Fund predicts that, at best, the recovery of developed economies could begin by the end of 2020 and be transmitted to developing countries. Perhaps this is also the beginning of the worst recession since the Great Depression². According to the International Labour Organization, the crisis could lead to the destruction of 195 million full-time jobs³ worldwide in the second quarter of 2020 alone. According to forecasts of the Ministry of Economy, the impact of the coronavirus infection on the economy is currently difficult to predict, and further developments that are currently underway may carry long-term macroeconomic risks and lead to a massive reduction in capital and, consequently, structural unemployment⁴.

On March 11, 2020, the World Health Organization announced the COVID-19 pandemic, and on March 12, the Government of the Kyrgyz Republic declared a ban on public events. From March 16, 2020, preschools, schools and higher education institutions in the country were closed for quarantine and transferred to online education. From March 22, a state of emergency was introduced on the territory of the country, and from March 25 - an emergency situation in Bishkek, Osh and some areas in the south.

According to information from the School of Data on confirmed COVID-19 cases in Kyrgyzstan, as of June 21, 2020, the largest number of infected cases was registered at the age of 20-35 years - 1142 cases, in general, in the age category of 16-35 years old there were 1270 cases, which is 40.3% of the total number of confirmed cases in the country.

¹ *Shared responsibility, global solidarity: Responding to the socio-economic impacts of COVID-19, April, 2020.* <https://unsdg.un.org/resources/shared-responsibility-global-solidarity-responding-socio-economic-impacts-covid-19>

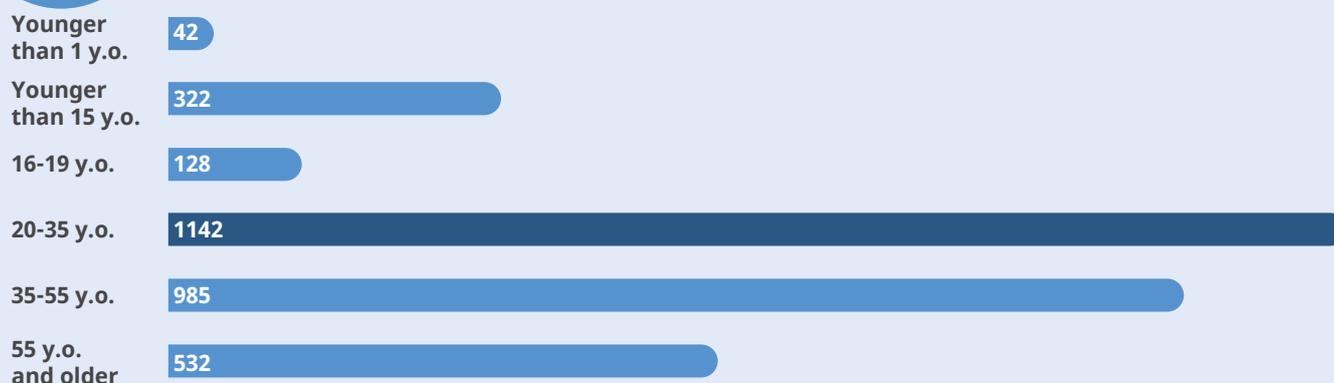
² Georgieva K., 2020, *Confronting the Crisis: Priorities for the Global Economy*, Retrieved from: <https://www.imf.org/en/News/Articles/2020/04/07/sp>

³ ILO, 2020, *COVID-19 causes devastating losses in working hours and employment*. Retrieved from: https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_740893/lang--en/index.htm (23.06.2020)

⁴ Ministry of Economy of the Kyrgyz Republic, *Brief Express Information on Key Indicators socio-economic development of the republic for January-March 2020*, Received: <http://mineconom.gov.kg/froala/uploads/file/6f536a19b4e4a1816b0c4ebbd05cddc2fac1cd0.pdf> (date of visit 23.06.2020)



Diagram 1. Distribution of COVID-19 by age, cases (as of June 21, 2020)⁵



Source: The School of Data

In this regard, a thorough analysis of the impact of COVID-19 on youth will provide insight into how government initiatives and development projects can be effectively used to reduce poverty and inequality, provide social protection, promote labour and employment and strengthen livelihoods, and take other appropriate measures to protect and support vulnerable youth and involve them in combating COVID-19.

Youth issues and priorities in the youth sphere are set out in the country's strategic documents - «The Youth Policy Concept for 2020-2030», approved by the Government on October 18 2019,

and also in the state programme «Development of youth policy for 2017-2020», approved by the Government decision of August 10, 2017. At the same time, it should be noted that it is necessary to review the existing plans taking into account the changed situation. It is important to restructure the existing systems in order to create more equitable, inclusive and sustainable economic systems. The existing social security systems need radical reform, considering the inclusion of informal workers in the system.

⁵ The School of Data, 2020, Open data on COVID-19 in Kyrgyzstan. Retrieved: <http://opendatacovid.tilda.ws/> (date of visit 23.06.2020)

METHODOLOGY

This chapter presents a field survey methodology to study the needs, challenges and problems of young people caused by the COVID-19 pandemic in Kyrgyzstan. The study was conducted by a quantitative method based on telephone surveys of respondents and supplemented by data obtained from a desk study of documentation.

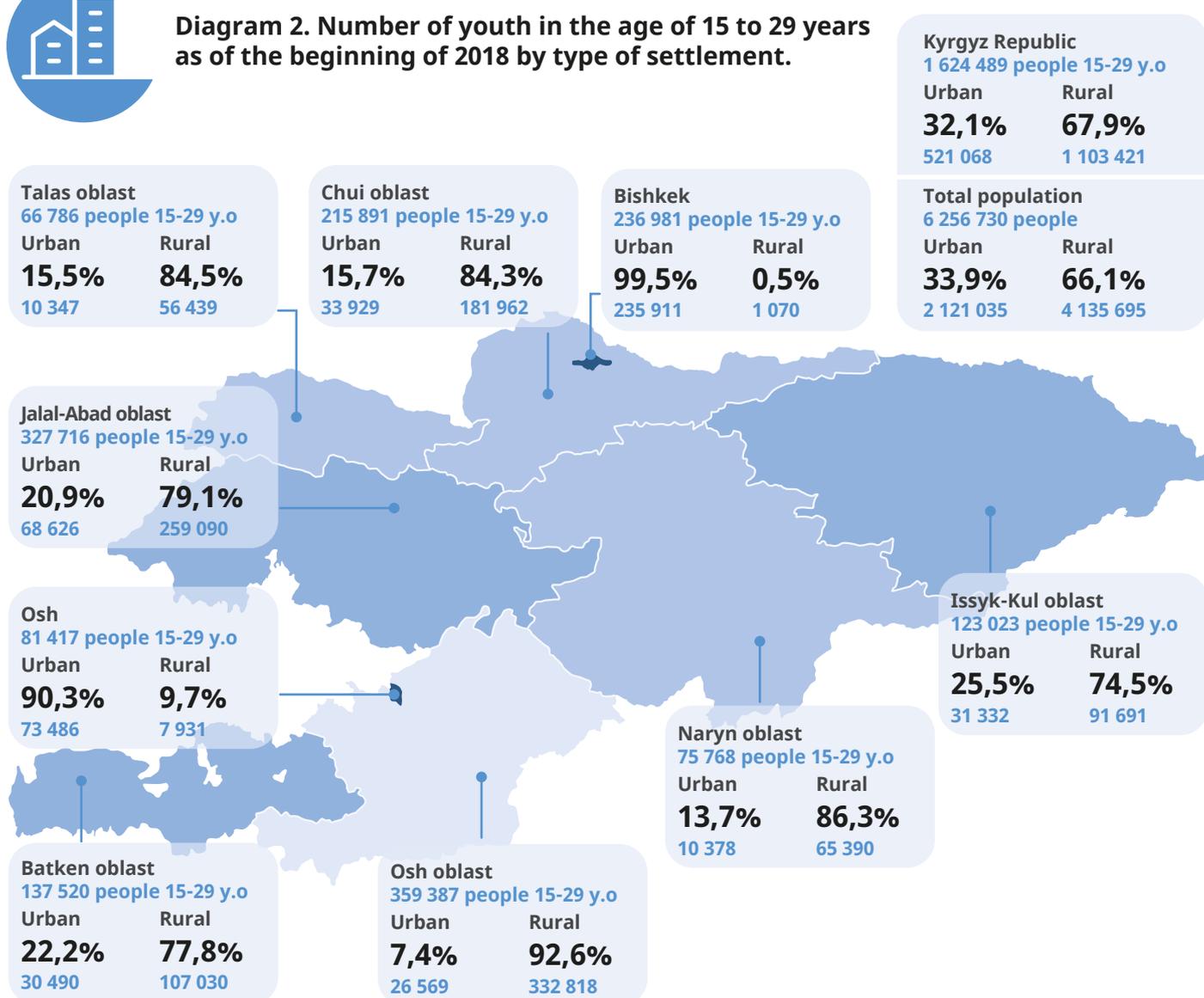
Determination of the general statistical population of the study was made on the basis of data from the National Statistical Committee of the Kyrgyz Republic¹.

The estimated number of young people aged 15-29 at the beginning of 2018 was 1,624,489. This represents 26% of the total population of 6,256,730 for the period under review. 67.9% of the total number of young people lived in villages, and 32.1% in cities, respectively. Table 1 shows that the largest number of urbanized youth is registered in the Issyk-Kul region, where 25.5 per cent of young people live in urban areas. Osh region is the least urbanized, with only 7.4% of young people living in urban areas.

¹ Age tables are available upon request from the NSC KR.



Diagram 2. Number of youth in the age of 15 to 29 years as of the beginning of 2018 by type of settlement.



The application of the formula for calculating the sample population shows that a sample at the KR scale becomes representative within 95% of the confidence interval and a sampling error of $\pm 5\%$ with 384 respondents. However, it is important to note that the survey results are fully applicable at the national level, but cannot be used as a document for decision-making at the oblast and district levels. The present study does not provide an opportunity to increase the sample size of 384 respondents in each region, respectively, in the regional context, the scale of the work does not cover the need to ensure a sampling error of $\pm 5\%$, with 95% confidence interval, within the available budget.

Vulnerability definition

There are many approaches and definitions of vulnerability. According to the UN definition, the vulnerability of young people means exposure of a given age group to some form of disaster¹. Shilpa Khanna Arora et al. suggest identifying vulnerable youth who are more exposed to risks than their peers. "Vulnerability is a relative state that can range from resistance to total helplessness"². Wettenburg defines youth vulnerability as "the distorted relationship of young people with social institutions such as the family, school, labour market, health care and justice"³.

Ukrainian sociologist Lanovenko suggests defining vulnerability as presence of social risks. Social risks are related to human rights and social security issues (disability, pregnancy and childbirth, diseases, death of close relatives, etc.) . The toolkit, proposed by a group of scientists under the guidance of Skinner, is based on identifying vulnerabilities from material, emotional (psychological) and social perspectives:

1 Hardgrove Abby, Kirrily Pells, Jo Boyden and Paul Dornan, 2014, *Youth Vulnerabilities in Life Course Transitions*, UNDP Human Development Report Office.

2 Khanna Arora Shilpa, Dheeraj Shah, Sanjay Chaturvedi, and Piyush Gupta, 2015, *Defining and Measuring Vulnerability in Young People*, *Indian J Community Med*, 40(3), pp.193–197
See.: Taro Y. *Elementary Sampling Theory*. – Englewood Cliffs, NJ.: Prentice-Hall, 1967. P.398.

3 Khanna Arora Shilpa, Dheeraj Shah, Sanjay Chaturvedi, and Piyush Gupta, 2015, *Defining and Measuring Vulnerability in Young People*, *Indian J Community Med*, 40(3), pp.193–197
See.: Taro Y. *Elementary Sampling Theory*. – Englewood Cliffs, NJ.: Prentice-Hall, 1967. P.398.

1. Material aspects - money, food, clothing, housing, health and education;
2. Emotional aspects - care, love, support, a place to grieve and contain emotions;
3. Social aspects - lack of a supportive peer group, role models to act as role models or guidance in difficult situations, and risks in the immediate environment

Given the context of Kyrgyzstan, in this study we consider vulnerable youth in the following categories:

- young people living with HIV / AIDS
- young people with disabilities
- children of migrants

Migrant children are a special category of children, most of whom live with older relatives or with other close relatives of their parents. According to social workers and teachers, this category of children is noticeably different from their peers living with their parents. According to the data of UNICEF in Kyrgyzstan, the vulnerability of girls and children in migrant families has taken on a significant scale and affects all spheres, from the safety of life to social rights and an increasing level of socio-psychological vulnerability . Gender stereotypes, norms and expectations create additional barriers in access to services and opportunities for education and employment, especially for young girls and girls in rural and conservative communities. Therefore, along with these vulnerable groups, the present study pays particular attention to young people living in difficult, subsidized and border areas of the Kyrgyz Republic.

Also, when calculating the sample, young people were ranked by age categories. In accordance with the law "On Youth", citizens between the ages of 14 and 28 are considered young people. However, it should be noted that within this category of citizens there are also differences in opportunities to achieve the goal and realize spiritual, cultural and other needs, including access to information. Thus, young people can be divided into three age groups:

- a. Citizens between 14 and 18 years of age - this group falls under the protection of the Law on Juvenile Rights Protection.

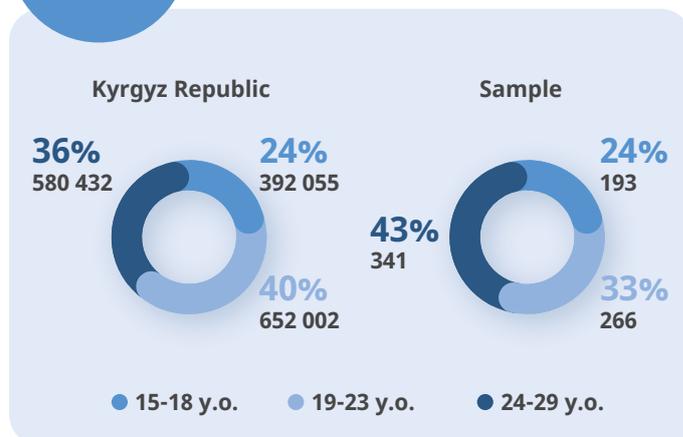
b. Citizens between 19 and 23 years of age are adult young people looking for further education and specialization.

c. Citizens from 24 to 28 years of age - young people in the process of developing obtained specialties, skills and family formation.

Having considered the possible distribution of the total sample size by country regions, as well as vulnerability and age criteria according to the Terms of Reference⁴ for the survey, stratified (regional) sampling was applied.



Diagram 3.
Proportional distribution of the sample by age categories



4 Attachment 1. Terms of Reference

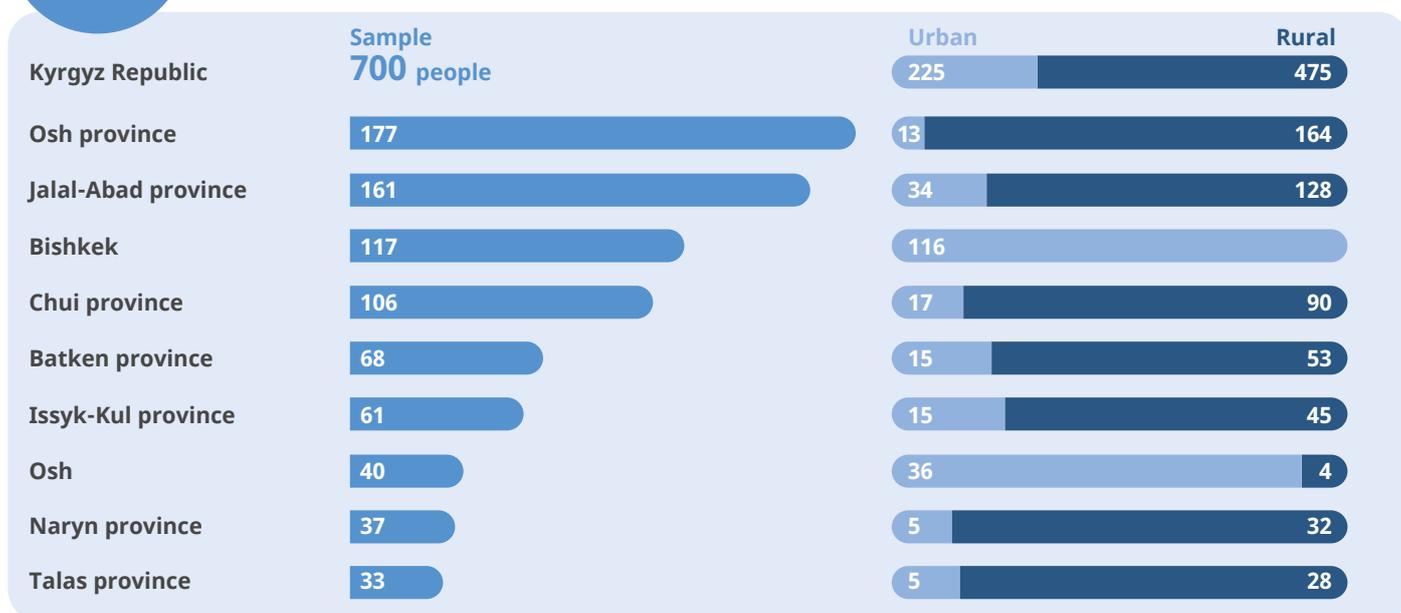
Sample distribution by settlement type

For 700 respondents the share of people in the cities is 225 people (32,1%) and 475 people (67,9%) in rural areas, see Table 3. The largest number of rural youth were covered in southern regions: 154 in Osh province and 120 in Jalal-Abad province.

It should be noted that urban young people are also the most numerous in Jalal-Abad province, with 32 people, which is almost comparable to the sample size in Osh.



Diagram 4.
Sample distribution by type of sample, persons



SAMPLING PROCEDURE

A multi-stage proportional random sample, with the consideration of quotas by age and regional categories, was used to collect data among youth. The issue of gender distribution was monitored by the survey quality control supervisors and the survey itself implied observance of proportions between boys and girls during fieldwork.

A targeted search was used to identify vulnerable young people by the following quota:

- Young people living with HIV/AIDS - 10 persons.
- People with disabilities - 10 persons.
- Children of migrants - 50 persons.
- Children from remote areas - 30 persons.

In addition to the telephone survey, an on-line questionnaire¹ was prepared and distributed through open youth platforms.

¹ [Attachment 2. Online questionnaire](#)

FIELD SURVEY METHODS:

1. Telephone survey of respondents based on a pre-prepared questionnaire (CATI)

2. Electronic survey (CAWI)
The use of CATI and CAWI complies with the rules

of social distance and, at the same time, allows for standardized collection and processing of data much faster than in the case of F2F (face to face).

DATA COLLECTION

This part of the report contains a description of data collection and quality assurance system.

Telephone data collection

Data was collected by a team of 20 interviewers, 2 field supervisors and 3 quality control specialists using standardized questionnaires in Kyrgyz and Russian. Online training for the entire team was conducted before data collection began. During the training the following topics were discussed in detail: goals, objectives and peculiarities of this research; survey of the questionnaire content; completing the online questionnaire; interview techniques.

In the course of the survey, each respondent was provided with information about the study, the objectives of the survey, and consent to

participate in the survey was obtained. The survey lasted from 3 to 13 June 2020.

According to the developed methodology, a total of 800 people aged 15 to 29 years were interviewed. Also 40 additional questionnaires were collected. These data were used to replace the rejected questionnaires, in total 34 questionnaires were not applicable for processing. 100 respondents out of the total were categorised as vulnerable groups. Two interviewers were specially selected to conduct the survey among vulnerable groups, who were informed and carefully trained on the principles of interviewing vulnerable categories of population in order not to harm the respondents. The distribution of data collected for this group is as follows:

- Children of migrants – 50 persons.
- Youth with limited health opportunities – 9 persons.
- LGBT– 8 persons.
- Youth living with HIV/AIDS – 8 persons
- Children in remote areas – 25 persons

The average interview duration was 30 minutes. All interview audios were recorded and stored.

The main group questionnaires of 700 people are divided by provinces and presented in the diagram 5.

Disaggregation of respondents by sex and age category is given in the diagram 6

Online data collection

An online data collection using Survey Monkey's platform was launched at the same time as the phone survey. The questionnaire was distributed to youth groups. In total, 711 questionnaires were collected, 114 of which are valid.



Diagram 5.
Number of respondents per province

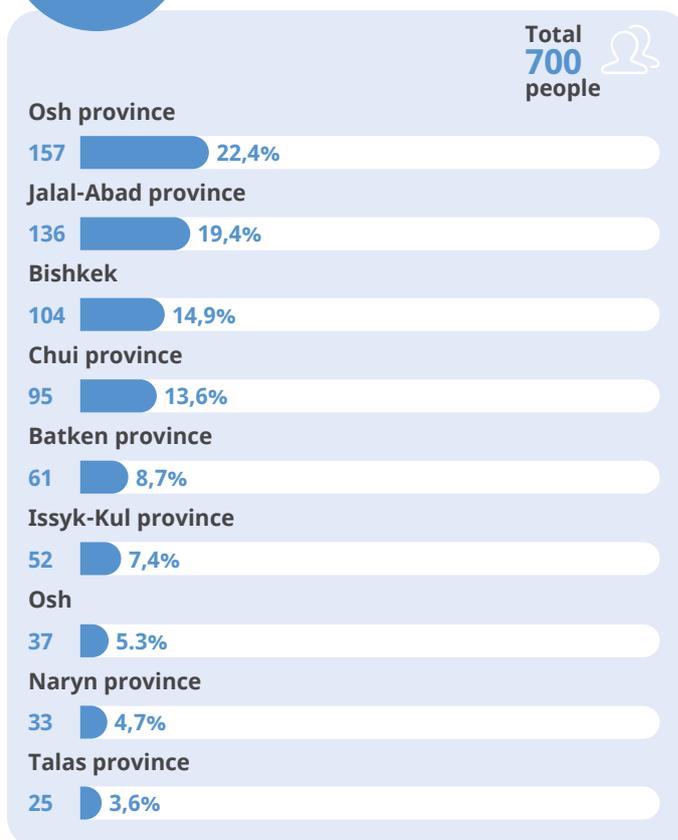


Diagram 7.
Number of collected questionnaires by province.

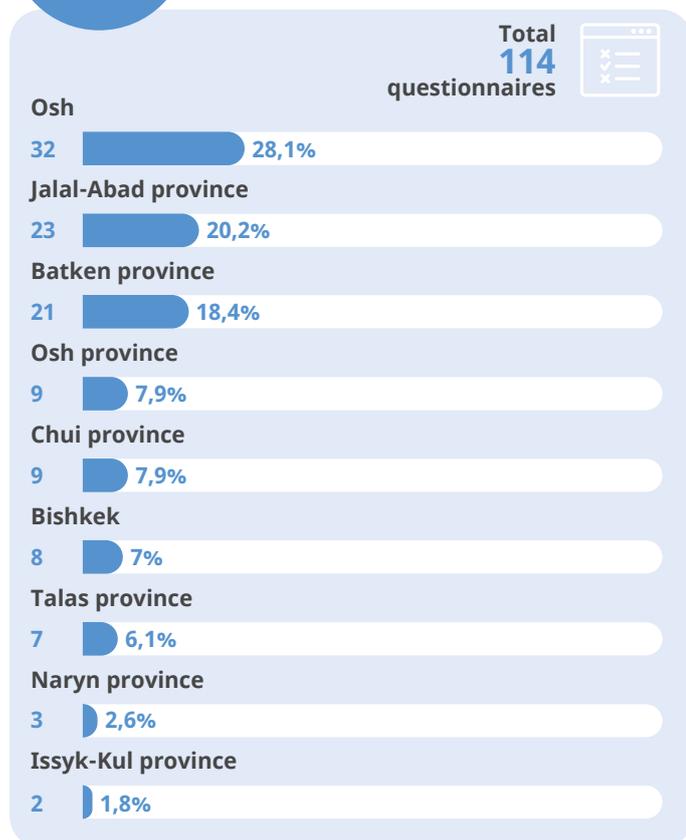
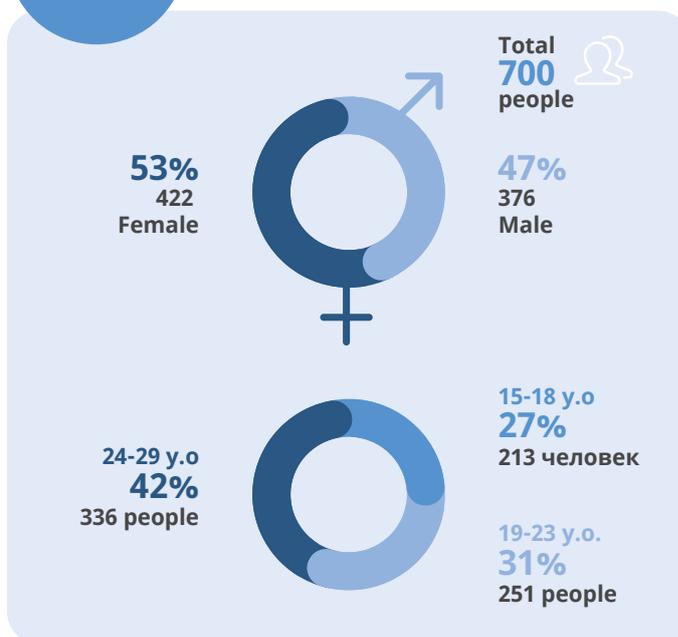


Diagram 6.
The number of respondents by sex



Data collection quality assurance system

Quality control of interviewers' work was ensured through the following measures: quality control in the first days of the call (Stop-Day), tracking the logic of incoming data and the correctness of filling out the answer forms (Checklist questions), listening to audio recordings.

During the monitoring, the following data were

checked to determine the quality of the interview: date and duration of the interview, conducting the interview with the desired respondent, matching the respondent's answers to the data in the database, interview techniques.

The quality control system used made it possible to monitor the work of the interviewers and collect the data at the same time, which allowed to identify and correct errors in a timely manner.

DATA PROCESSING

Based on the results of the surveys of the main group of young people, a separate database in SPSS format was prepared. Subsequently, data from the online survey were combined with data from telephone interviews, as the research team concluded that there were no significant

differences in response structure. The database on vulnerable groups was processed separately. The processing of the data provided a summary of respondents' knowledge, opinions and practices on the issues raised in the survey.

DESCRIPTION OF RESPONDENTS AND REPRESENTATIVENESS

The sample of telephone and online surveys is representative and corresponds to the general statistical population of young people in the country (according to the NSC KR). Due to the form of the surveys, the proportions have been slightly changed, but compliance with the statistical

population has been maintained - 55.7% of girls and 44.3% of boys; 61.3% of respondents from rural areas and 38.7% from urban areas. The predominant age group is 24-29 years old - 39.7 per cent.

VISUALIZATION OF RESPONDENTS' REPRESENTATIVENESS DATA



Diagram 8. Ratio of sample by number of urban and rural population to sex of respondents by provinces.

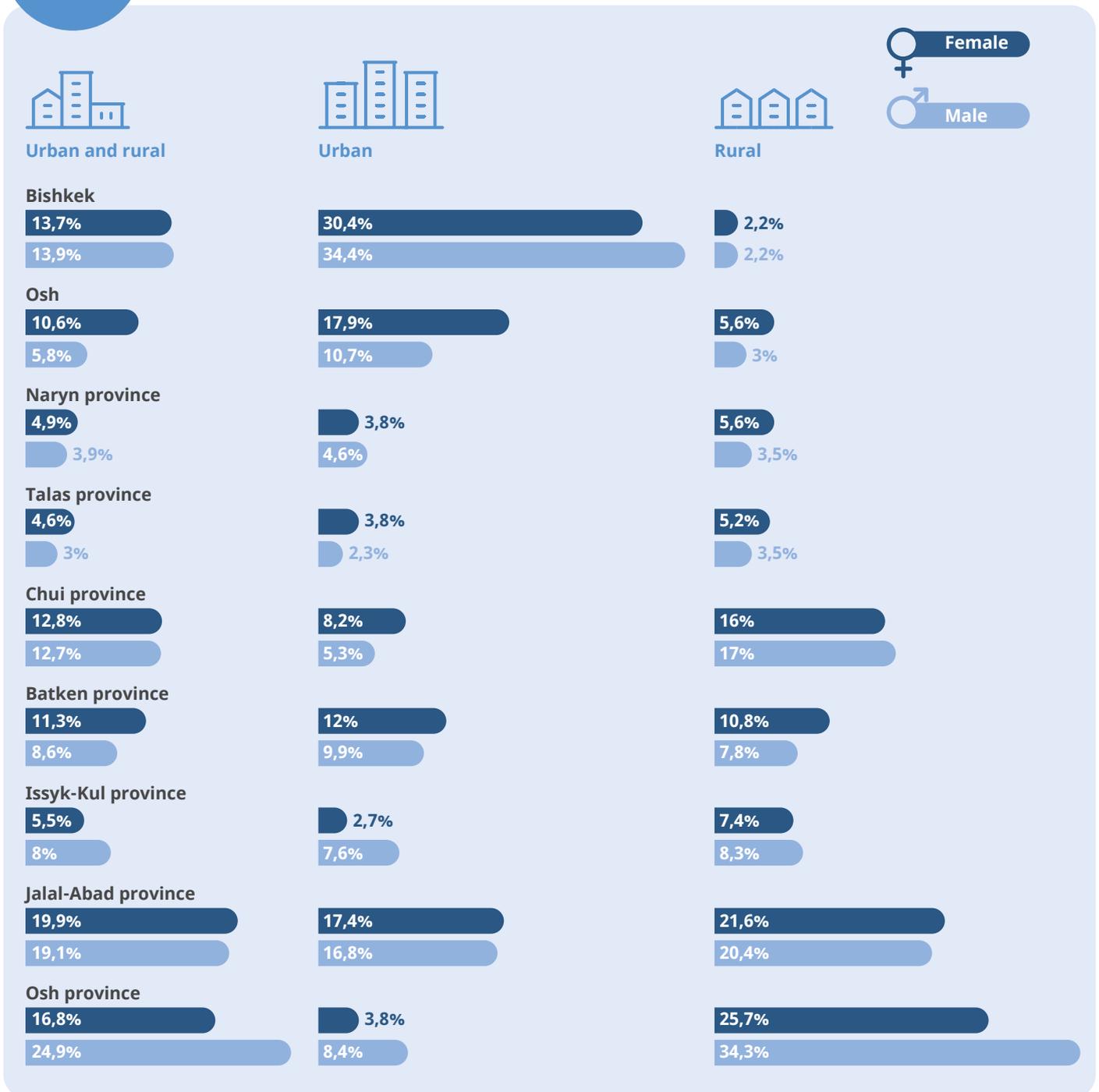




Diagram 9.
Correlation of sample by nationality and gender of respondents

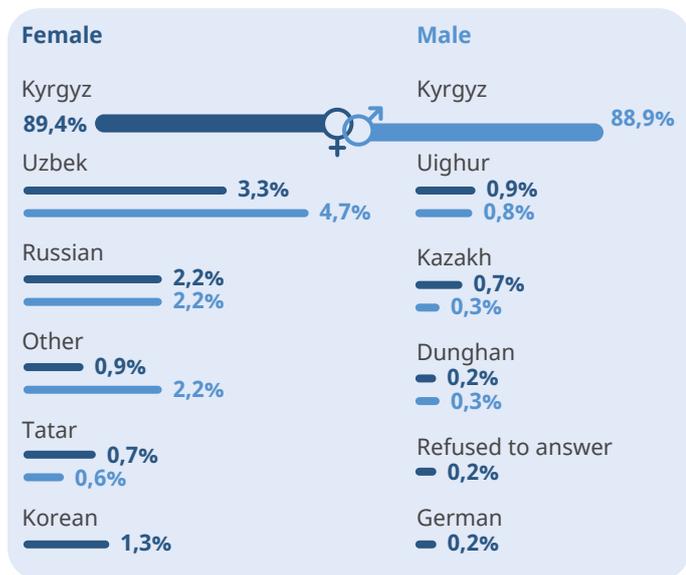


Diagram 10.
Ratio of sample by age and gender of respondents

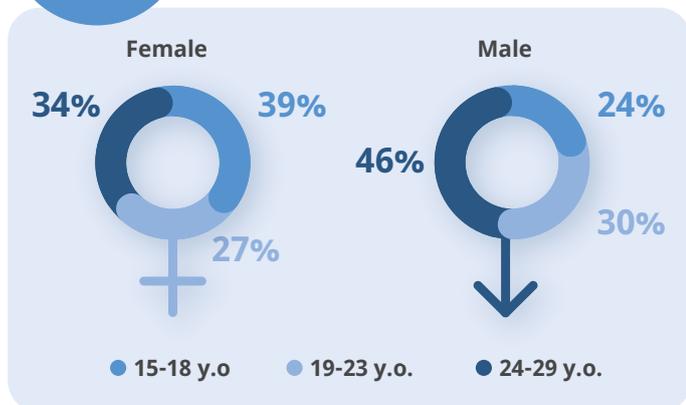


Diagram 11.
Sample education ratio by gender of respondents

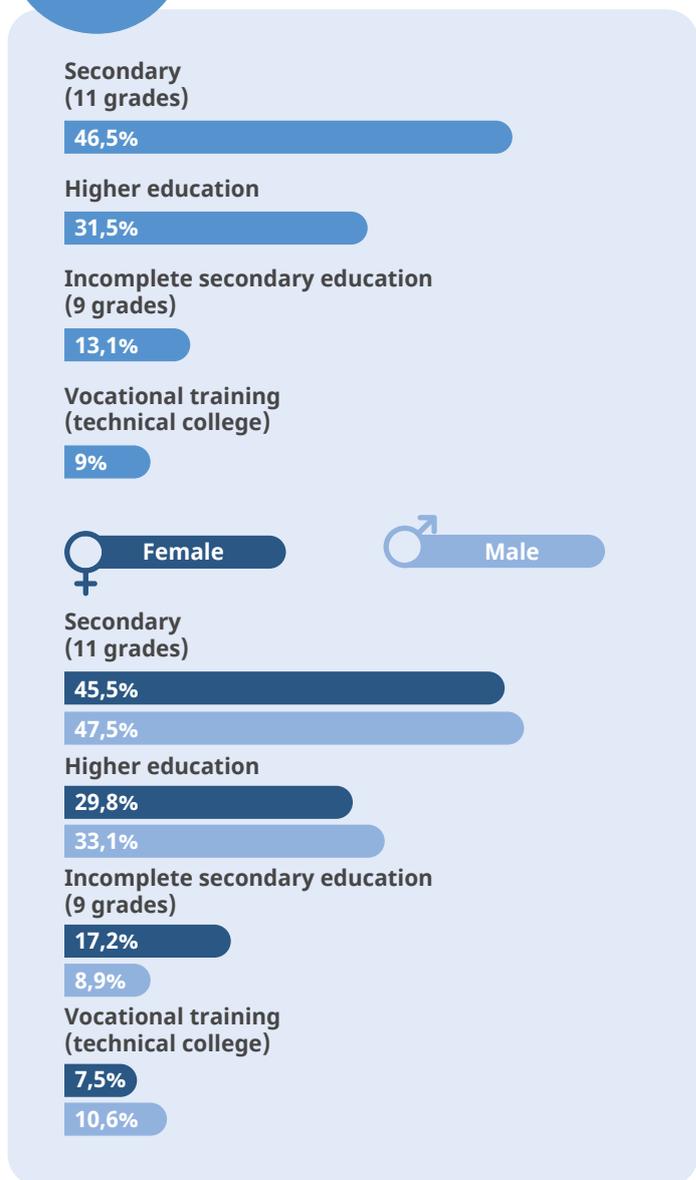




Diagram 12. Ratio of sample by marital status by gender of respondents

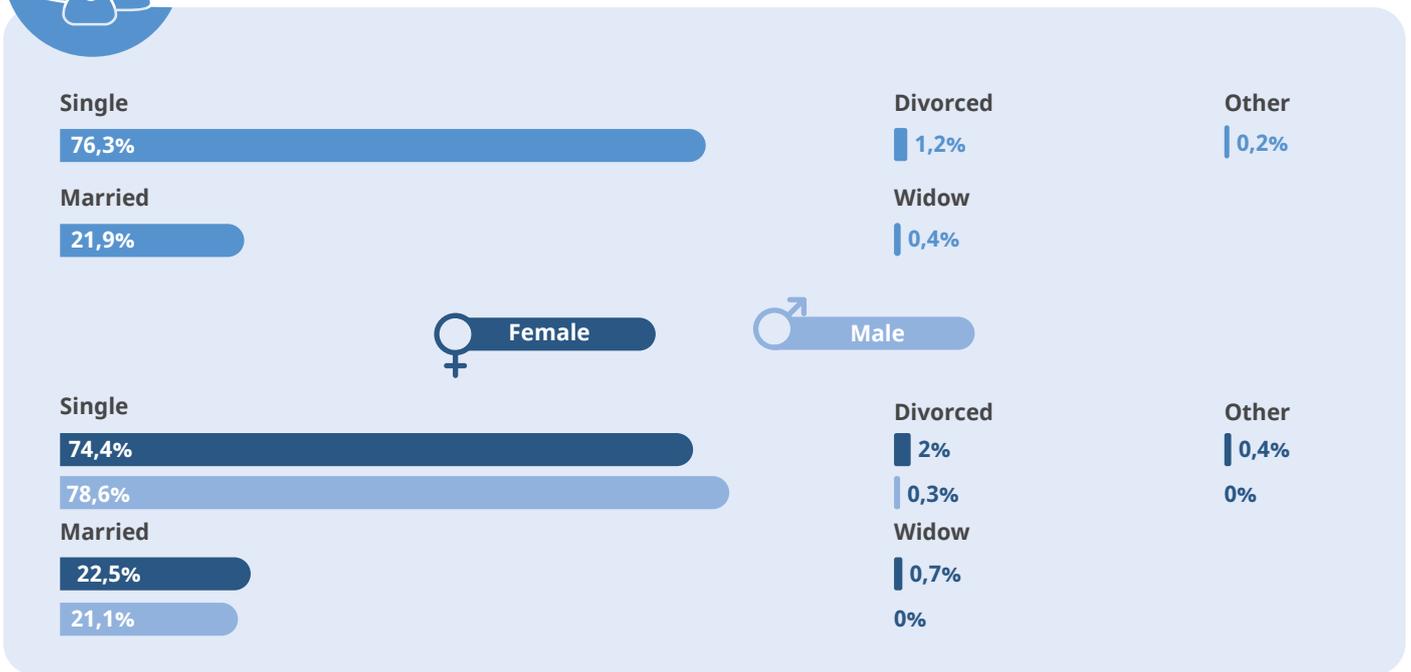
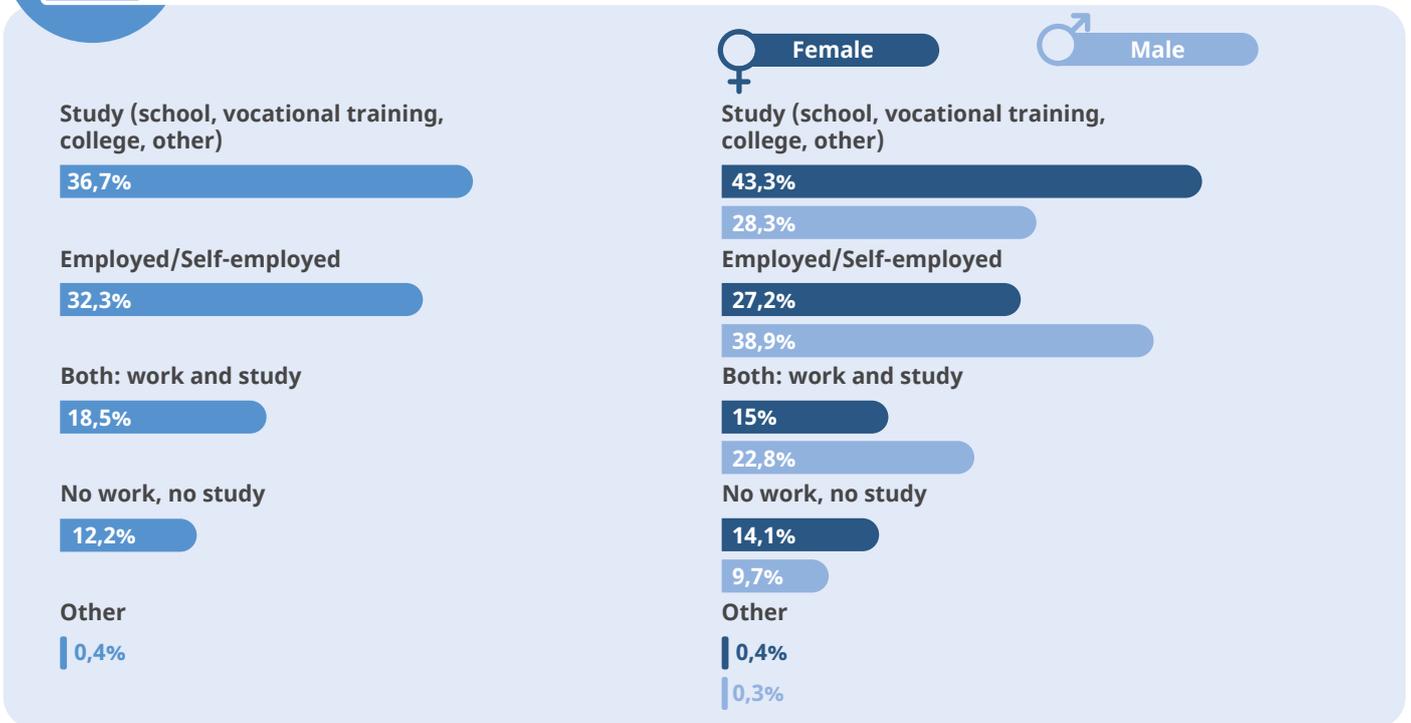
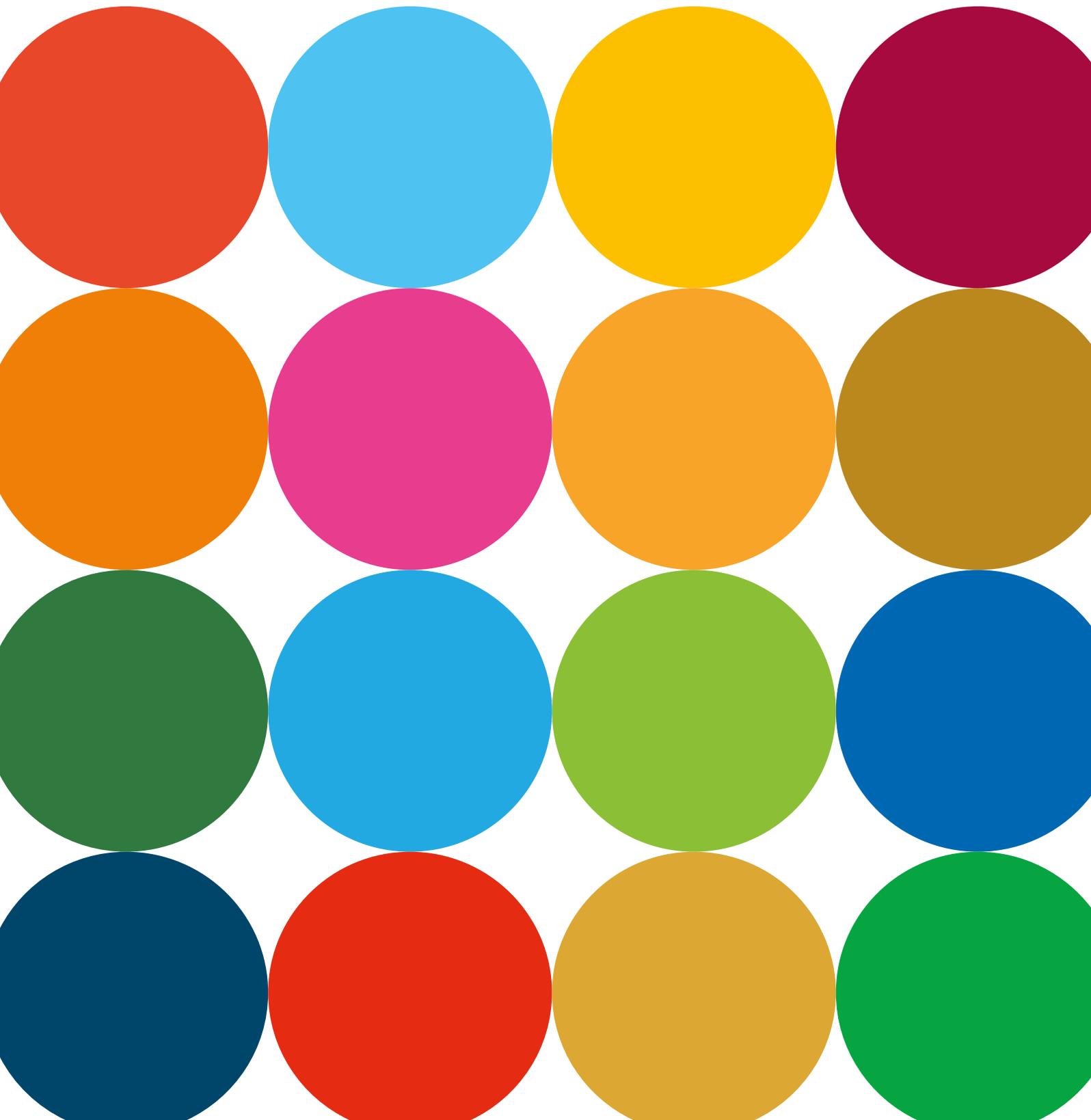


Diagram 13. Ratio of sample by employment in respect to gender affiliation of respondents.



DESCRIPTION OF COLLECTED DATA. AWARENESS AND PROTECTIVE MEASURES



AWARENESS

Access to and availability of a reliable source of information during the COVID-19 pandemic is a top priority for society. This is important so that most do not panic and ultimately be safe. From the beginning of quarantine to the present day, the Government of the Kyrgyz Republic has organized daily online press conferences and briefings at which members of the Government highlight the course of the pandemic, report on the situation and inform about necessary measures to contain the spread of infection. The Republican Headquarters for Combating COVID-19 has organized Telegram channels with information in Russian and Kyrgyz.

A preliminary analysis of government reports for young people shows that the messages at the

beginning of the quarantine we primarily focused on education, transition to online education, and payment for contractual form of study. At the same time, 92,2% of respondents considered the information on how to protect themselves from coronavirus to be the most important. Another 91,6% were most interested in the risks of COVID-19 infection (see Diagram 8). Only half of respondents were interested in how to continue learning during the pandemic. The study also found that respondents were poorly informed about access to reproductive health services and sexual education (21.9%) as well as about access to psychological services and support (33.4%).



Diagram 14.
Distribution of answers by type of information received, in %



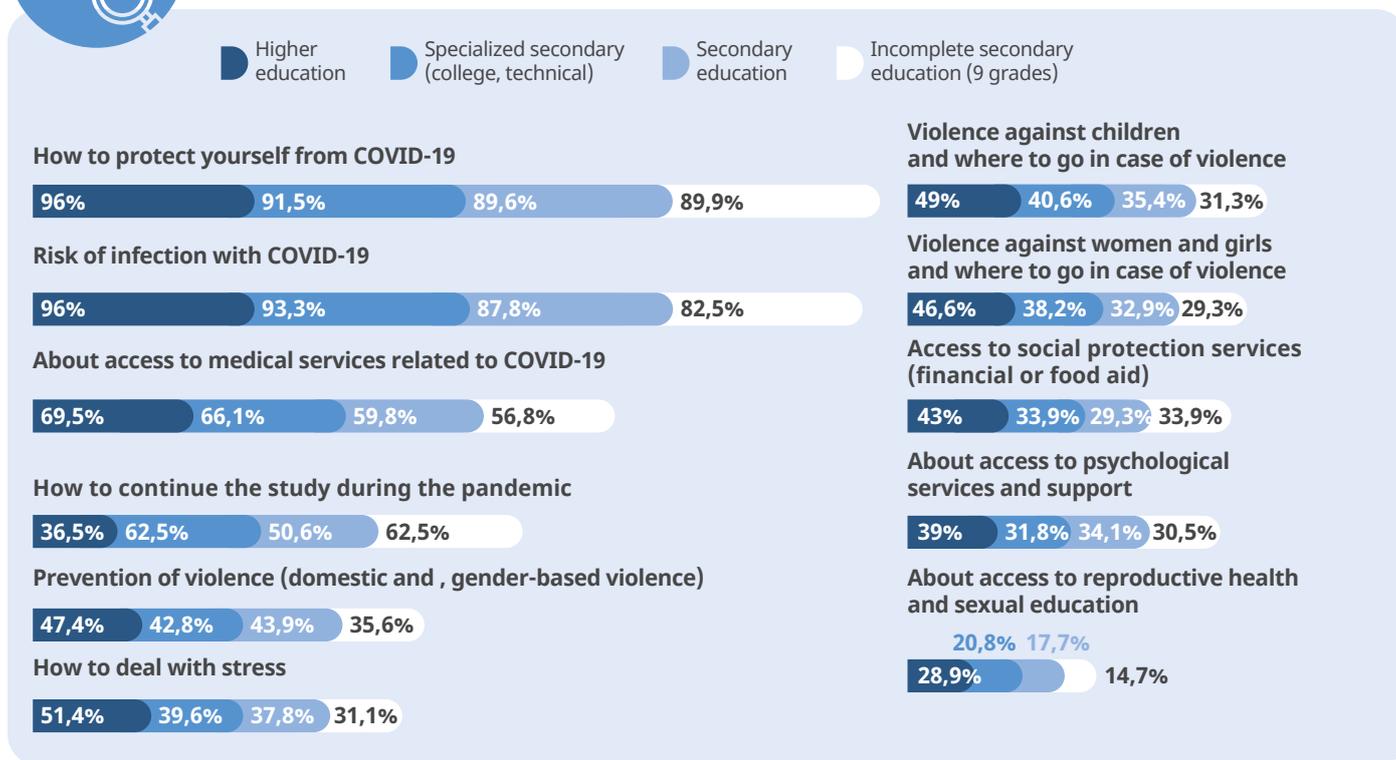
Based on the results of the work, it can be reasonably argued that the needs of information directly depend on the level of education and age of respondents.

Diagram 15 illustrates how the level of education is directly proportional to the level of awareness of respondents on a particular topic. People

with higher education are more informed about issues such as stress management, recognising and addressing violence against women and girls, reproductive health and sexual education, access to social protection services (cash or food assistance), and others.



Diagram 15. Correlation between the level of education and the level of awareness in different topics, in %



Girls with higher education between the ages of 24 and 29 have the highest percentage of awareness about violence topics: violence against women and girls, where to go in case of violence (46.7%), violence against children and where to go in case of violence (48.9 %). Girls with incomplete secondary education have the lowest level of awareness of these topics (26.9% and 29.5% respectively). Boys in the same category are significantly more informed on the same issues - 35.5% and 35.5 % respectively.

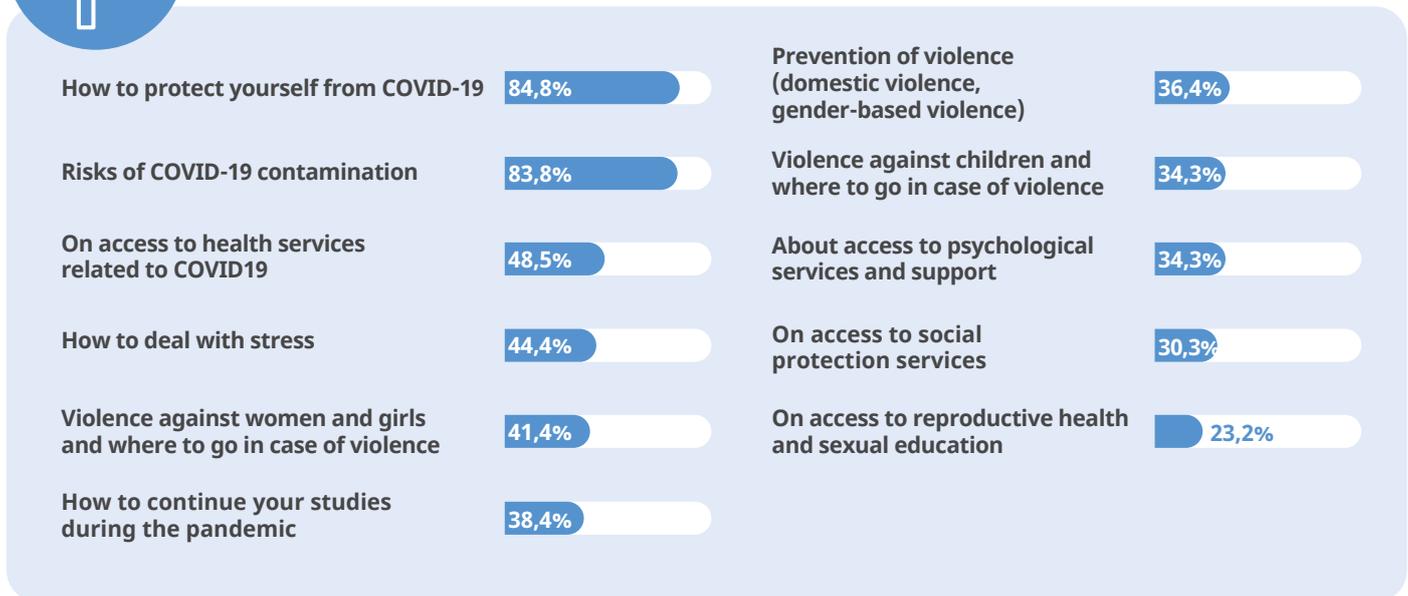
The level of awareness of vulnerable groups is, on average, 5-7 % lower compared to the main group. As with the main group, the two most popular topics during quarantine are: «How to protect yourself from the coronavirus?» (84.8%) and «About the risks of COVID-19 infection» (83.8%).

Vulnerable groups also have low awareness of access to reproductive health and sexual education (23.2%).

There is a significant difference in awareness of access to health services related to COVID-19 and access to education during the pandemic. These indicators are 12-16% lower compared to the main group. Given that the majority of respondents in this group were students (children of migrants), it can be concluded that they had significant learning difficulties during the pandemic.



Diagram 16. Distribution of answers among vulnerable groups by type of information received, in %



SOURCES OF INFORMATION

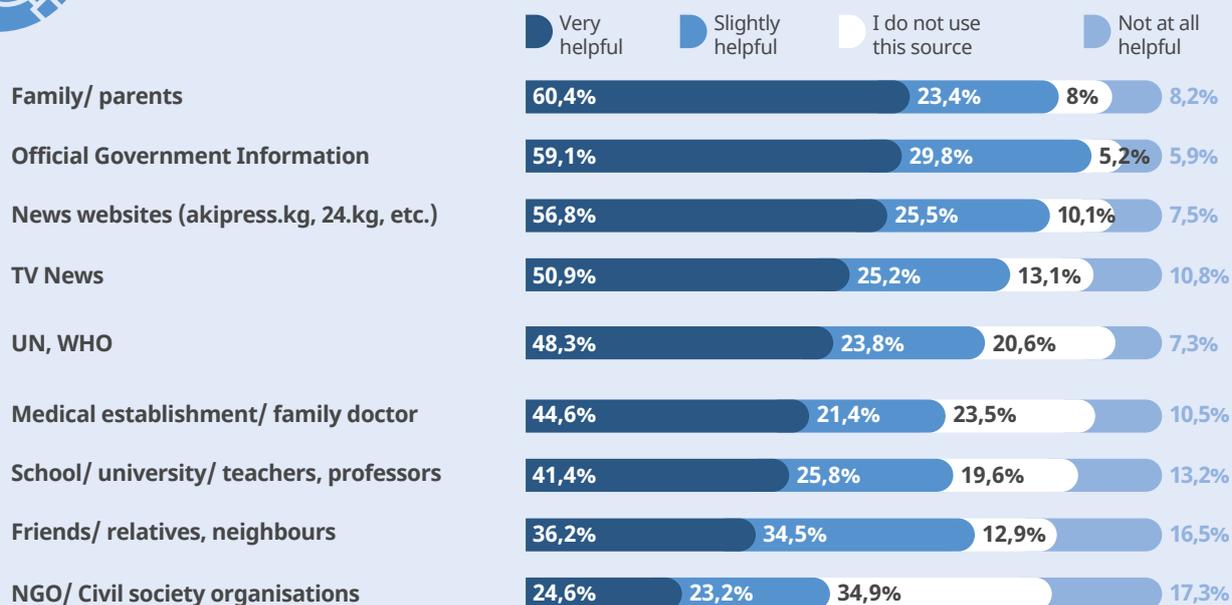
In general, there was no lack of information during the quarantine period. Main news agencies as well as media resources daily published data, and conducted special projects (translation of articles from foreign resources into Kyrgyz) on situation related to COVID-19. Based on the statistics provided by kaktus.media resource, on average, one news on the topic of coronavirus spread is viewed by 10,000 readers. The most popular news article was viewed by 65,000 readers in April of 2020.¹

At the same time, the main sources that respondents consider useful are their family/parents (60.4% - very useful), official government information (59.1% - very useful), information portals (akipress.kg, 24 kg, etc.), including all their channels in Instagram, Facebook, etc. (56.8% - very useful).

¹ Kaktus Media, 2020, *Scientists from Singapore have given a date of the end of coronavirus spread in Kyrgyzstan.* https://kaktus.media/doc/411804_ychenye_iz_singapyra_nazvali_daty_zaversheniia_rasprostraneniia_koronavirysa_v_kyrgyzstane.html (Date of visit: 21.06.2022)

The least valuable sources of information respondents consider NGOs, civil society organizations (34.9% - do not receive information from this source), medical institutions/family doctor - 23.6% and the UN, as well as the World Health Organization (WHO) - only 20.6% are aware of these information resources. The sources that the respondents considered not helpful were NGOs, civil society organizations (17.3% - not useful at all), friends, relatives and neighbors (16.5%). Thus, it can be concluded that young people consider to be useful only the information received from the circle of close relatives or official state sources.

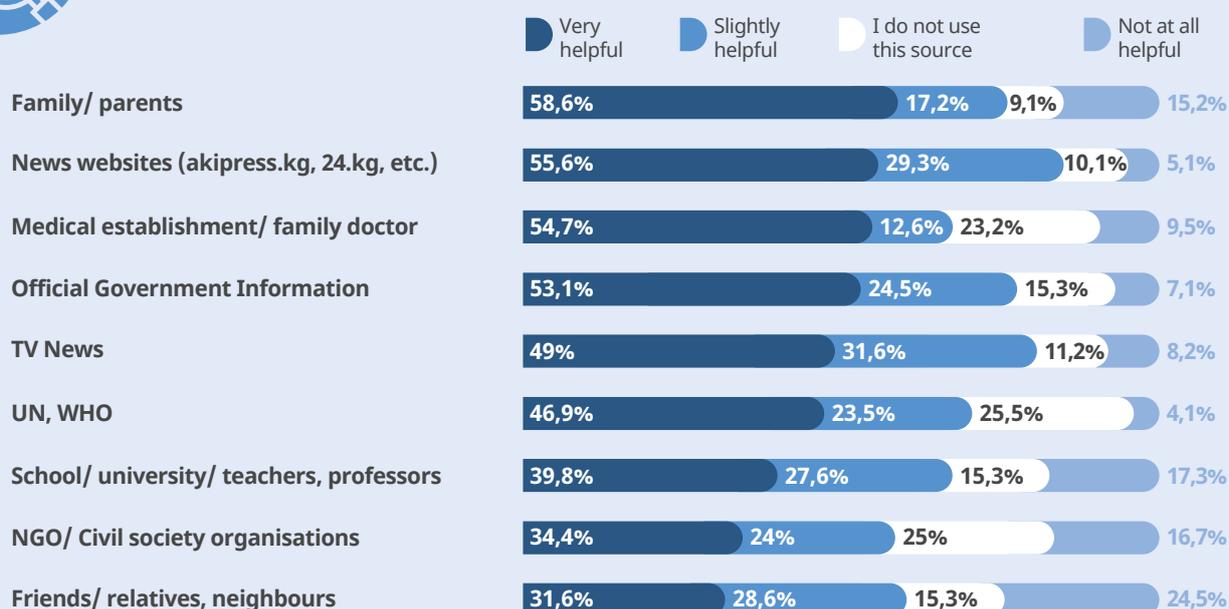
The level of trust of boys and girls in the various sources of information has very little fluctuation by gender. There are some differences with regard to official government information, where 63.6% of girls and 53.5% of boys find this source useful. A similar situation is observed with regard to news sources: 8.0% of girls and 14.2% of boys consider it useless, while 55.7% of girls and 45.0% of boys consider it very useful. The highest level of trust in information received from family and parents was recorded among boys (57.8%).


Diagram 17. Distribution of answers about useful information sources, %


The analysis of data from vulnerable groups shows that the respondents consider family to be the most useful and important source of information (58.6%).

However, in contrast to the main group, vulnerable groups demonstrate a higher level of

trust in information portals (55.6%) than in official government sources (53.1%). Sources from which respondents do not receive information also include NGOs, civil society organizations, medical institutions/family doctors, UN and WHO (23-26%). Similar to the main group, friends, relatives and neighbours (24.5%) were the most unhelpful sources.


Diagram 18. Distribution of answers about the usefulness of different sources of information among vulnerable groups, %


THE LEVEL OF PREPAREDNESS TO LIFE DURING PANDEMIC

The results of the study show that the pandemic exacerbates existing inequalities by exposing vulnerabilities in social and economic systems, as well as increasing the negative impact of restrictive quarantine measures on respondents.

Half of those interviewed assessed their preparedness at the beginning of the coronavirus outbreak as sufficient. Here is what the answers show:

- I have learned sufficient information about the virus and have taken all steps and measures to prevent infection (50.0%).
- I have purchased all necessary personal protective equipment and medicines (47.7%).
- I have purchased all the necessary food supplies for the period of quarantine (47.3%).

It should be noted that young people relied more on their parents, 58.2% replied that their parents provided them with everything they needed. 14.3% replied that they did not have time to prepare because they did not have resources or did not receive sufficient information (14.0). Nothing has changed for 25.5% of the respondents.

50.9% of the girls said they had bought personal protective equipment and medicines. Only 43.79% of young men did the same.

The study shows that girls are more dependent on the financial assistance of their parents, 63.8% of girls said that their parents provided everything they needed against 51.1% of boys, who provided for themselves, without the assistance of the older generation.



Diagram 19.
Correlation between the sexes on coronavirus outbreak preparedness, %

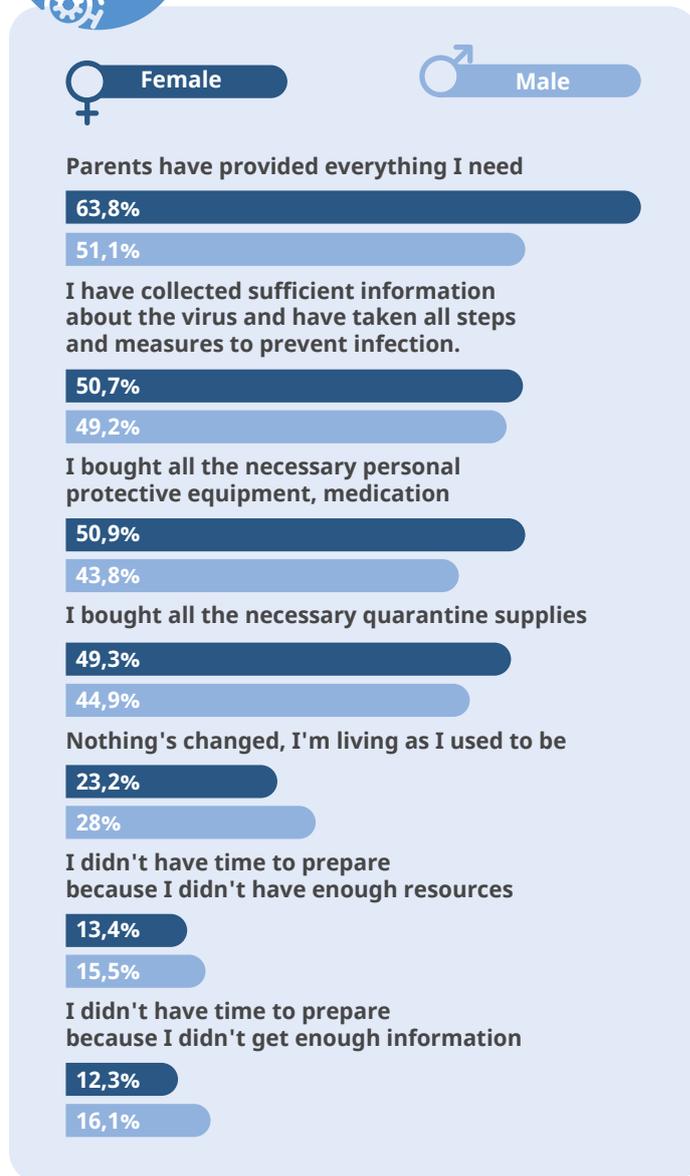
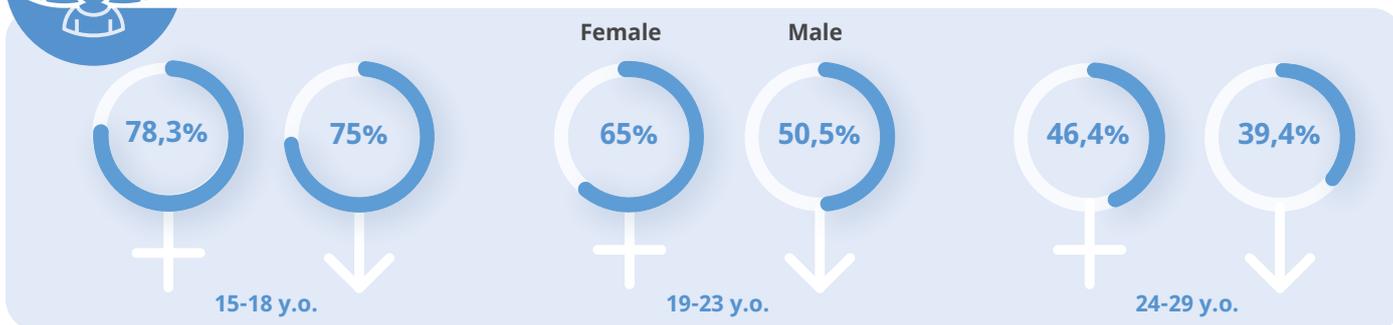




Diagram 20. Dependence of young people on parents by gender and age, %



Dependence on parents in preparedness for an outbreak of coronavirus decreases with age (77.2% of young people aged 15-18 vs. 42.8% aged 24-29). The correlation between the sexes in the age group shows that while boys and girls are equally dependent, boys become much more independent with age (65.0 per cent of girls depend on their parents against 50.5 per cent of those aged 19-23 years, and 46.4 per cent of girls against 39.4 per cent of those aged 24-29 years)

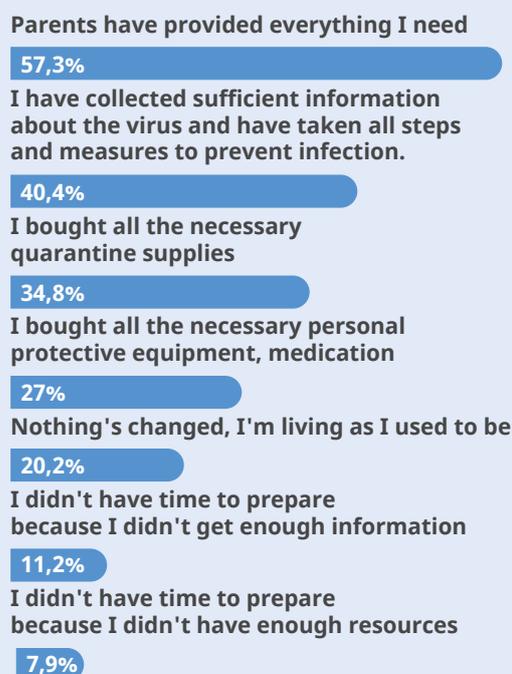
On the issue of preparedness for the outbreak of coronavirus, it can be observed that vulnerable groups are significantly less prepared in matters where financing was required, such as the purchasing necessary food supplies, personal protective equipment and medicines during quarantine.

The difference in financial capacity is 12-20% in comparison to the main group. Also, this group has low rates in terms of obtaining enough information to take all necessary measures to prevent infection. Their preparedness is 10% lower. However, parental dependency is the same as in the main group - more than half of the respondents remain dependent on their parents.

In addition, respondents answered that they received enough information about the coronavirus. However, despite the sufficiency of volume, the reliability of information raises some doubts among the target audience of the study. The greatest fears are the reliability of infection statistics and conspiracy theory around COVID-19, including myths about population ciphering and the establishment of possible total control over citizens by politicians.



Diagram 21. Preparedness of vulnerable groups to Coronavirus outbreak, %



Respondents also need more specific and reliable information about disease treatment protocols, vaccination options, and evaluation of the effectiveness of sanitary measures.

Assessing the adequacy of government actions also causes difficulties for the target audience. Respondents want to know what concrete and precise steps have been taken by the state, as the meaning of certain measures is not always clear, as the forecast and consequences of various measures are not clear.

Respondents need clear and simple information about what has already been done, what the government has achieved with the measures taken, and what to do with the second wave of morbidity.

The information needs of vulnerable groups are exactly the same as those of the main target group.

PROTECTIVE MEASURES

Over the last 7 days, respondents have used the following protective measures: wore a protective mask (88.8%), used disinfectants or antiseptics (87.8%) and washed their hands with soap for 20 seconds or more (81.2%).

The least practiced measures were use of disposable gloves (48.1%) and observing social distance (at least 1.5 meters) (48.1%). (See Diagram 15.)



Diagram 22. Distribution of answers about protective measures, %

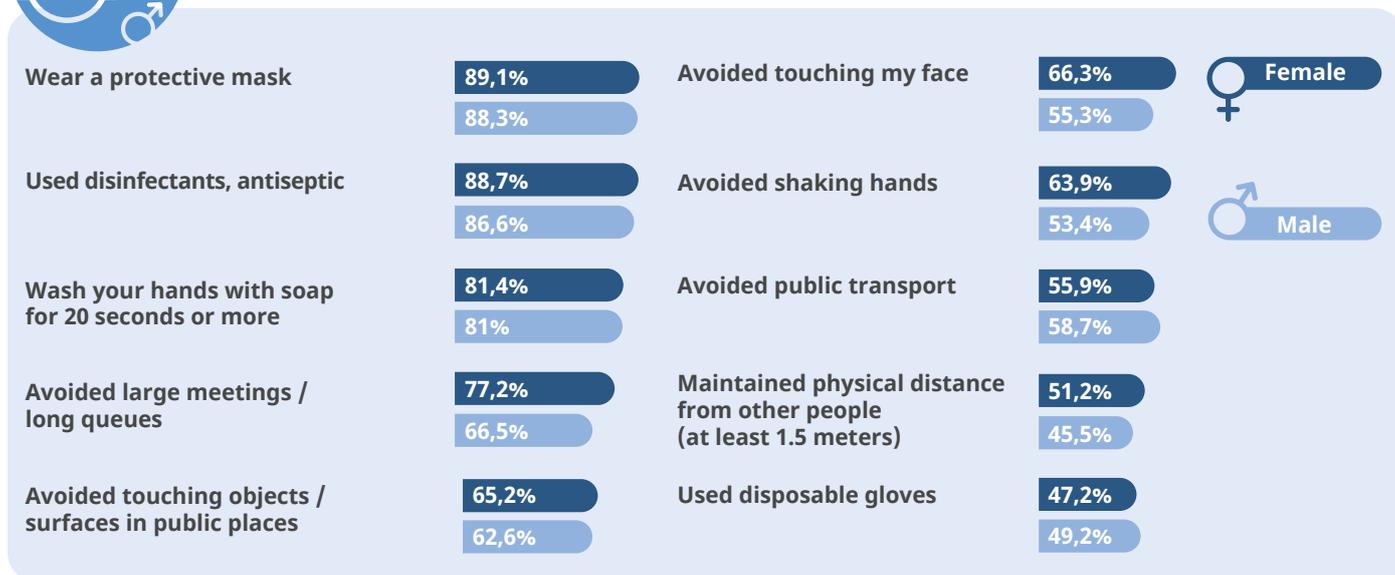


From a gender perspective, the difference is around 10% for attending large meetings/ long queues, touching your face and avoiding handshakes. Otherwise, both sexes have the same rates except for using public transport: boys are slightly less likely to use public transport (58.7%)

than girls (56.0%) (See Figure 16). In respect to age, girls aged 24-29 were more responsible for the protection against the coronavirus, and the highest percentage of girls in this age group had a high level of protection.



Diagram 23. Correlation between sex and use of protective measures in the last 7 days, %



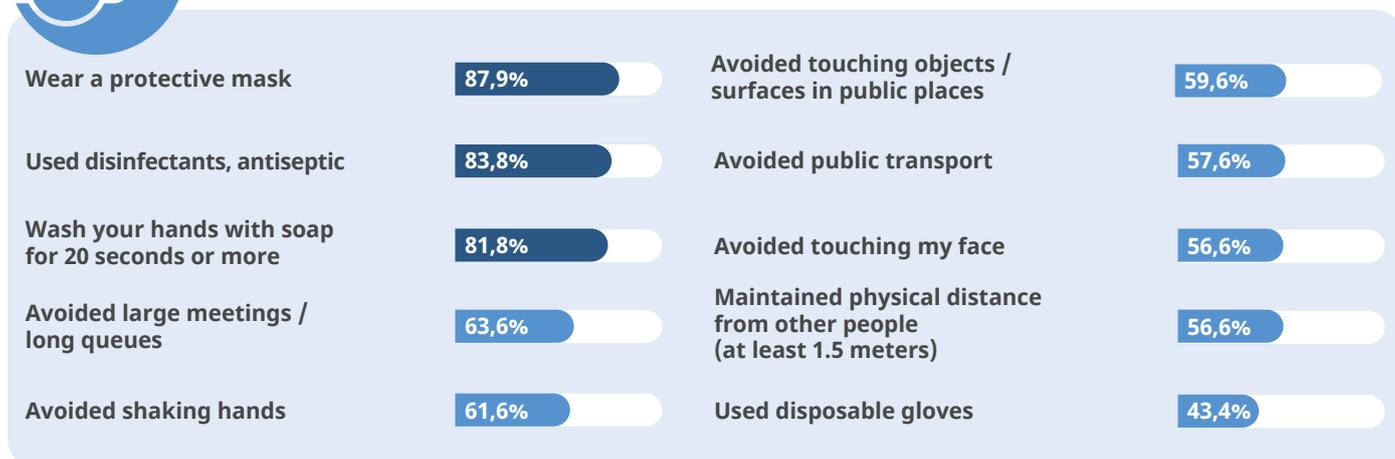
Respondents also noted other protection measures against the virus, such as house cleaning, which was more frequent than usual, disinfection of buildings, use of oxolin ointments and other virus blockers. On a few occasions, respondents did not practice any of the above. In general, girls were more likely to clean their homes than boys, while boys were more likely to disinfect public buildings.

The main protection measures used by respondents from vulnerable groups in the last 7 days are similar to those of the main

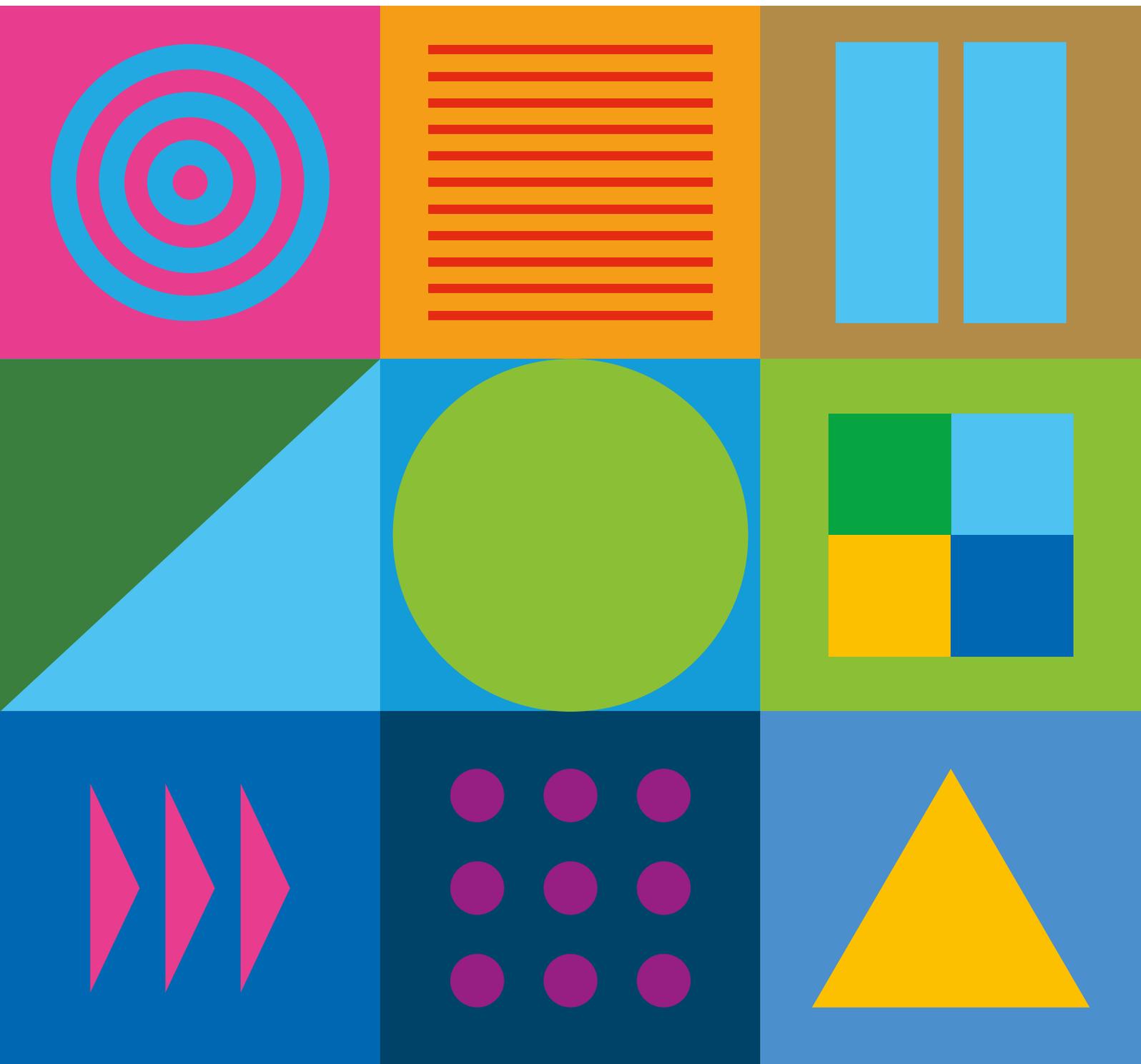
group: wearing a protective mask (87.9%), using disinfectants, antiseptic (83.8%), washing hands with soap for 20 seconds or more (81.8%). At the same time, it is important to emphasize that people with disabilities are more exposed to the risk of COVID-19 infection, as it is much more difficult for them to implement basic protective measures for several reasons: dependence on physical contact for support, inaccessibility of hygiene products (especially in rural areas), inaccessibility of health information.



Diagram 24. Distribution of responses among vulnerable groups on protective measures, %



DESCRIPTION OF COLLECTED DATA. CURRENT PSYCHOLOGICAL STATE



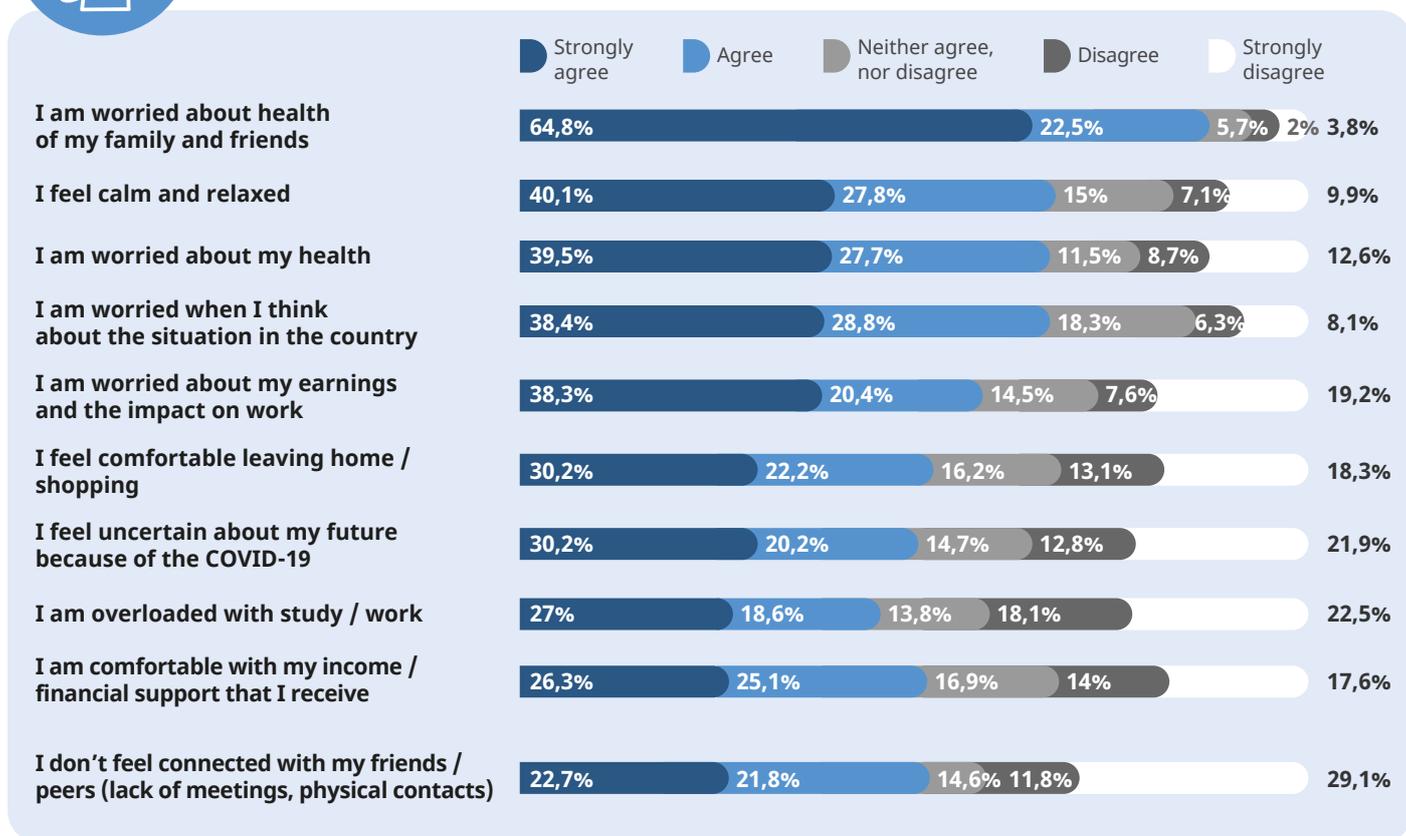
The results of the study show that there is a high level of anxiety among young people (about 60%)

Firstly, this is due to anxiety about the health of family members and friends (64.8% - fully agree / agree, 22.5% agree / agree). The greatest concern, however, is the health of older parents and the desire to protect them from the virus. The second place is occupied by concerns about their health (39.5% - fully agree/agree, 27.7% - agree/agree), the third place is occupied by concerns about the situation in the country (38.4% - fully agree/agree, 28.8% - agree/agree).

At the same time, 40,1% of respondents assessed their condition as very relaxed and calm. The smallest number of respondents agreed with the statement that they have no contact with friends/peers (no meetings, no physical contacts), while 29,1% completely disagree with this statement.



Diagram 25.
Current psychological state of respondents, %



Data show that girls have higher levels of anxiety than boys. Some of the statements have a notable difference in terms of gender equality studies: to the statement «I am calm and relaxed», 46.9% of the male respondents fully agree, compared to 34.7% of the female respondents.

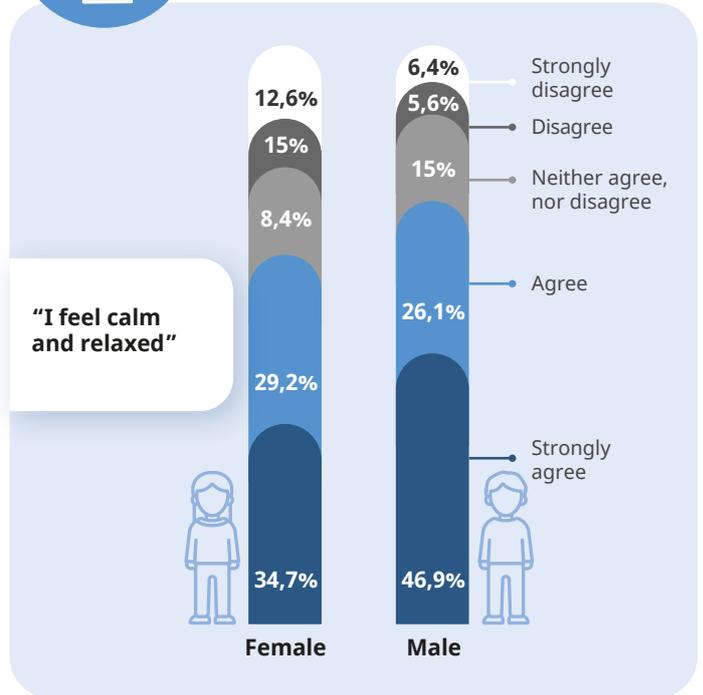
And vice versa, twice as many girls as boys fully disagreed with this statement. In our opinion, this difference is due to the fact that the economic impact of COVID-19 particularly affects girls and young women, who tend to earn less, have less savings, and face increased house work, which is the result of children not attending school and elderly people having a greater need for home care due to overloaded healthcare system.

As diagram 27 shows, the level of anxiety is higher among girls in the age in the range of 15-18 years.

Only 29.7% said they felt calm and relaxed against 37-39% of girls in other age categories. In contrast to males, whose level of anxiety increases with age.



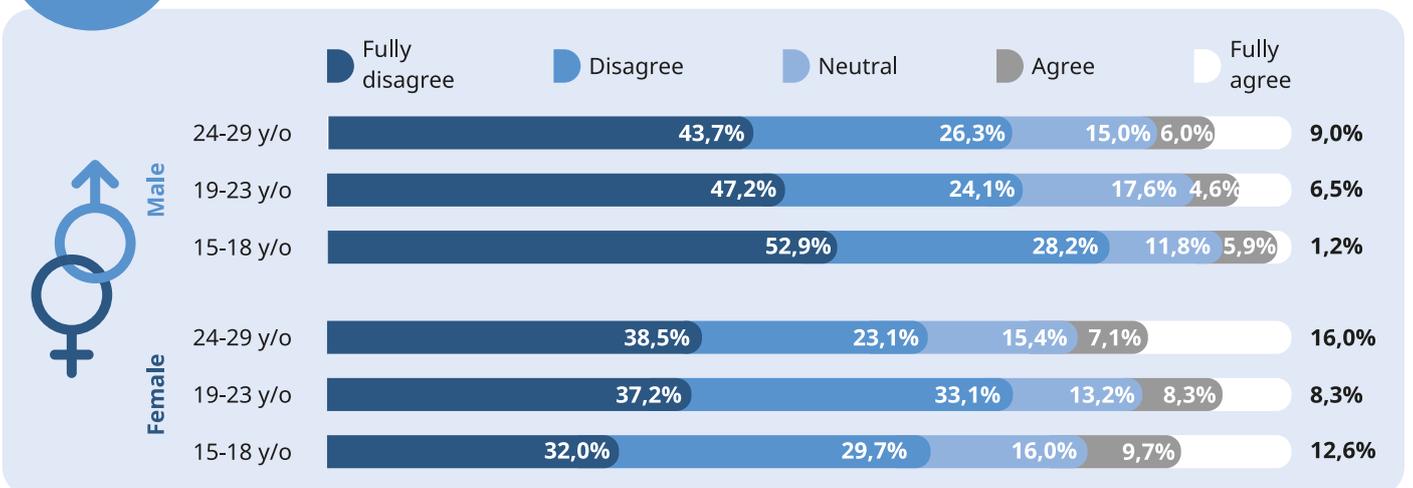
Diagram 26.
Distribution of answers by gender on the question of calmness, %



In addition, girls feel less comfortable leaving home and doing shopping (21.1% completely disagree and 14.8% disagree), compared to boys who answered that they feel comfortable enough (35.8% completely agree, 22.4% agree).



Diagram 27.
Distribution of answers by gender and by age on the question of calmness, %



As shown in diagram 29,

about 35% of the girls surveyed do not feel confident in the future, with the number of boys not confident in the future recorded at 25%.

These figures are comparable with global data on confidence in the future. Thus, according to ILO data, in low- and middleincome countries, the informal employment of girls is higher than that of boys¹. In Kyrgyzstan, the overall unemployment rate among girls is 8.9%. Girls earn less than boys in Kyrgyzstan; on average, the difference between the income of women and men of similar age is 25.0% or more in favor of boys².

Also, most girls noted that they do not feel connected with friends/peers (lack of meetings, physical contacts). 26.2% of the girls fully agree with this statement, while 24.9% agree, compared to 18.7% of the boys who fully agree with the statement and 18.4% agree with the statement in general.

In age and sex distribution, girls aged 15-18 years and boys aged 24-29 years disagreed that they had lost touch with their peers (23.9% and 15.0% respectively). It is worth mentioning that the older the girls, the more they claimed that they did not feel connected to their peers and friends, while boys experience the opposite.

Respondents' age affects their level of anxiety about earnings and the workplace.

The older the respondents are, the more they are concerned about the impact of COVID-19 on earnings.

45.9% of youth aged 24-29 years worried about earning, compared to 21.6% of youth aged 15-18 years. According to the NSC indicators of 2018, there are 1,686.9 thousand people aged 15 years and older employed in the informal sector, which is 66.4% of the economically active population. At the same time, 577.3 thousand informally

¹ https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/publication/wcms_626831.pdf, cmp.20-21

² NSC, 2019, Boys and Girls of the Kyrgyz Republic



Diagram 29.
Distribution of answers by gender by the question of future confidence, %

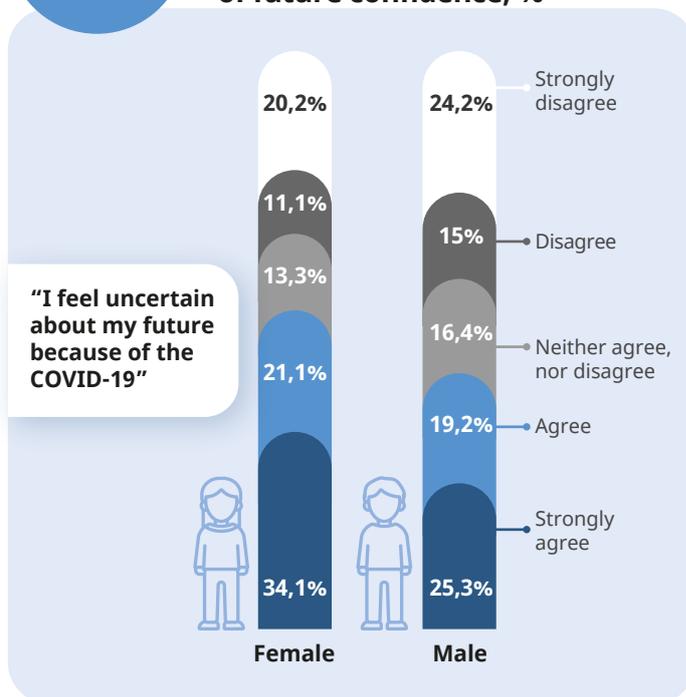
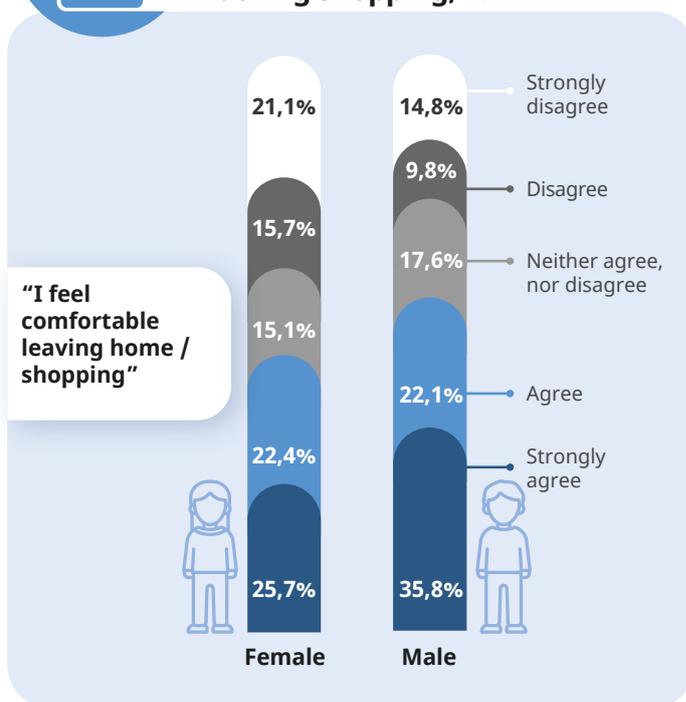


Diagram 28.
Distribution of answers by gender to the question of self-perception during shopping, %



employed people are aged 15-29 years, or 35% of the total population³. The highest percentage of informal employment is among young people aged 25-29, or 273,100 persons, or 35% of the total population. Informal jobs are usually of low quality, low pay, and are not protected by basic labour standards and workers' representative organizations, so they were the first to suffer during quarantine.

The rural population shows a higher level of anxiety than the urban population.

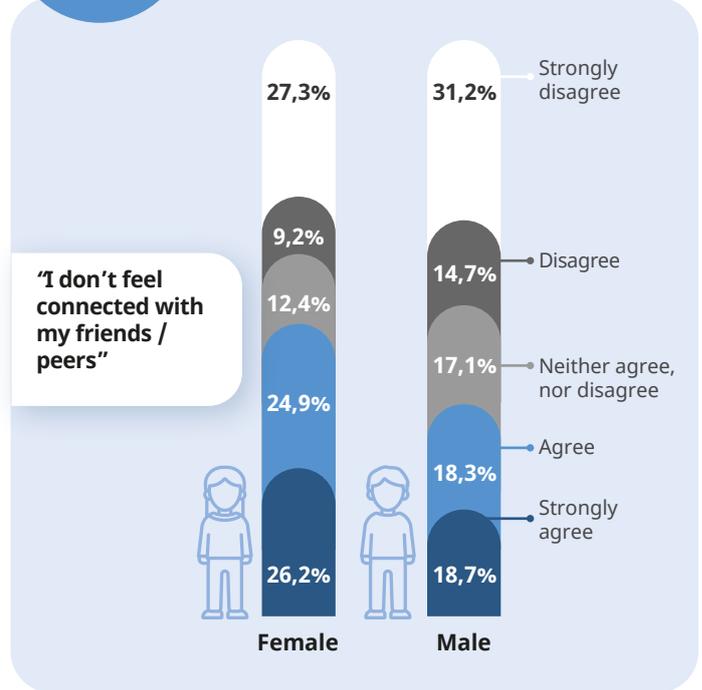
The most concerning issues for rural youth are their concern about the situation in the country (44.9%), their health (42.5%) and uncertainty about their future because of the coronavirus (34.2%). While both sexes expressed their concern about the situation in the country in roughly the same proportion,

the rural girls showed a higher level of anxiety about their health and future because of the coronavirus.

³ NSC, *Employment and Unemployment. Results of the Integrated Household and Labour Force Budget Sample Survey 2018*



Diagram 30. Gender distribution of answers related to connection with peers, %



Rural adolescents aged 15-18 said that they were more overworked than their urban counterparts (45.7% of rural males and 31.5% of girls fully agreed, compared to 23.7 % of urban males and 14.5% of urban females).



Diagram 31. Distribution of answers by sex and age on the question of communication with peers, %

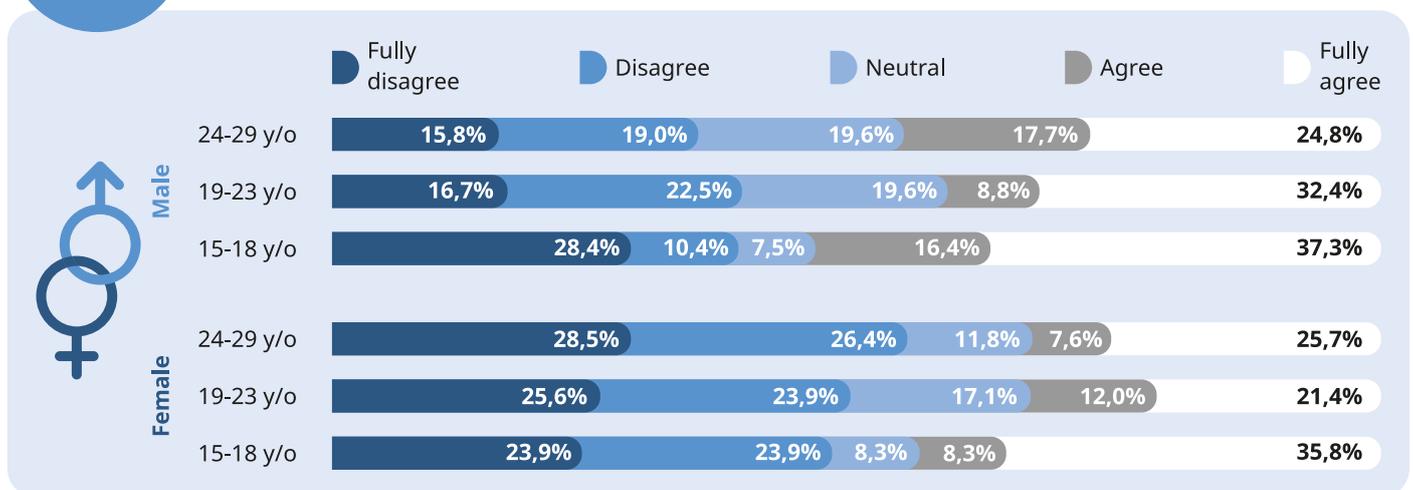




Diagram 32.
Work/study workloads
by urban and rural population

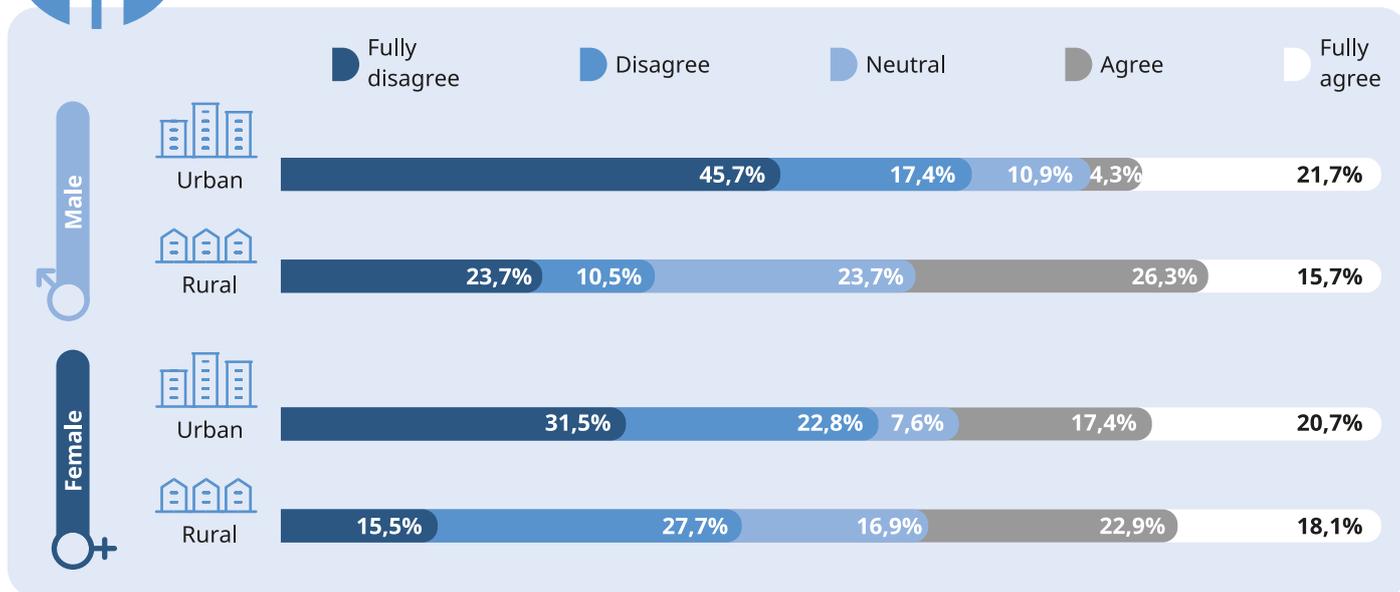
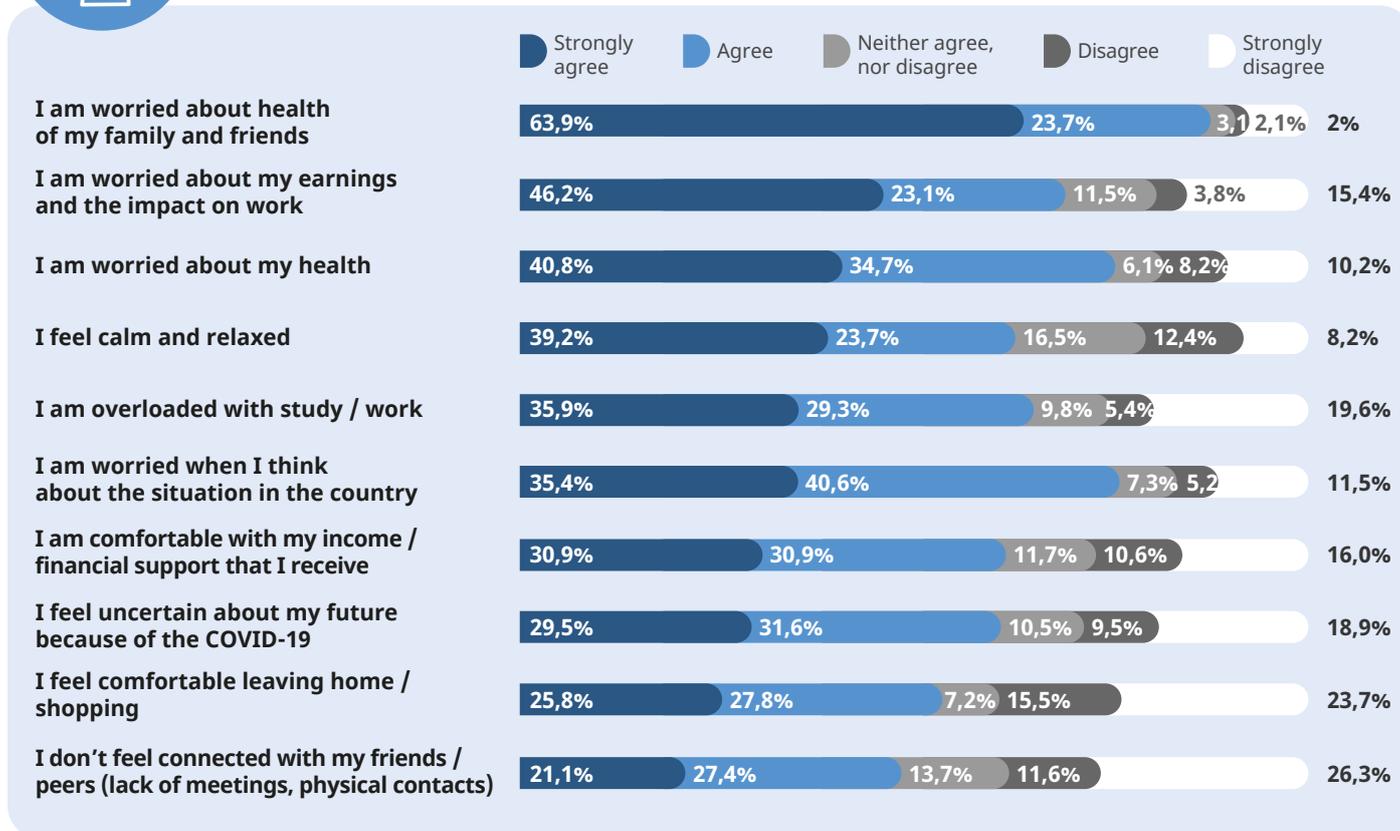
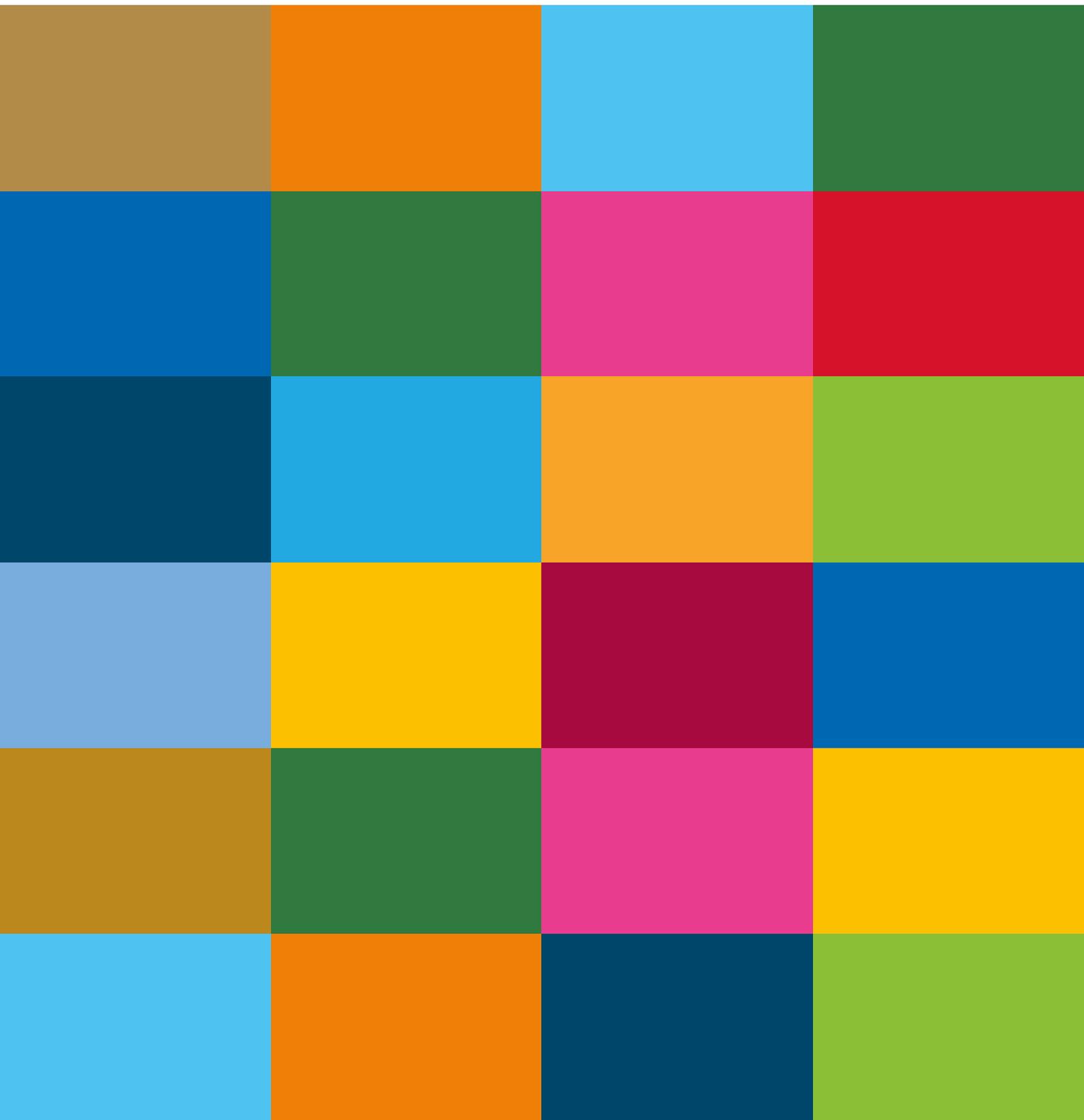


Diagram 33. Current psychological state among vulnerable groups, %



DESCRIPTION OF COLLECTED DATA. CHANGES IN LIFE AFTER THE COVID-19 OUTBREAK



According to forecasts of the Ministry of Economy of the Kyrgyz Republic, the country's GDP will decrease by 5.3% in 2020¹. According to IMF forecasts, economic indicators will decrease by 11%². The negative economic, social and financial consequences will continue after the pandemic, and will significantly impact on the young people and vulnerable groups. Thus, the budget of the state agency for youth, physical education and sports has been reduced for 305.7 million KGS or 32% compared to the approved budget³.

35.2% of respondents were not sure how their lives would change after the pandemic, 33.1% did not notice changes in their daily lives, and 13.6% found difficult to answer this question.

At the same time, the level of fear among girls is more than two times higher, than among boys.

Also, girls more often found it difficult to answer this question (16.85% among girls).

In the age and gender structure, young men aged 15-18 noted most of all, that no changes happened in their everyday life (46.4%) and their life had changed for the better (38.1%), whereas, more girls at the age of 15-18 years, found it difficult to answer (21.7%) and women aged 24-29 years felt fear most of all (36.8%).

Diagram 34. Distribution of responses on the impact of pandemic on lives of respondents, in %



Diagram 35. Correlation of responses on the impact of coronavirus, by gender, in %



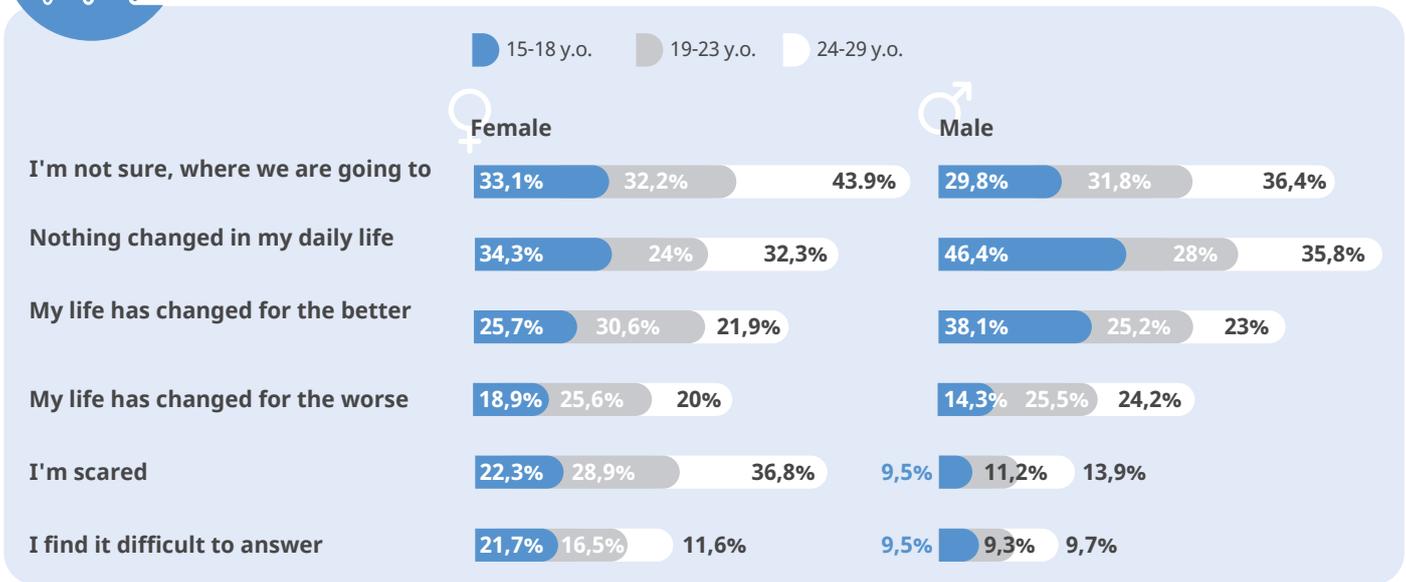
1 21 <https://rus.azattyk.org/a/30635247.html>

2 https://24.kg/ekonomika/150090_pandemiya_koronavirusa_chno_jdet_ekonomiku_kyrgyzystana/

3 <https://today.kg/news/260622/>



Diagram 36. Correlation of responses on the impact of coronavirus, by gender, in %



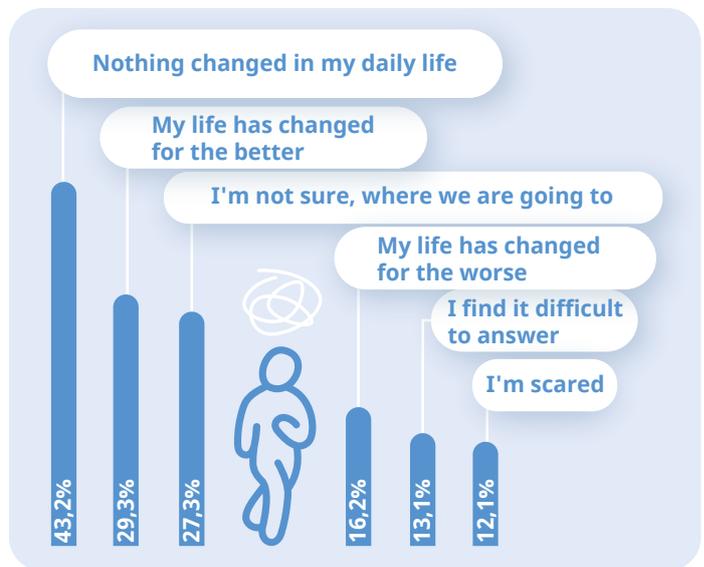
Young people in cities noted change for the worse (25.6%) or found it difficult to answer (17.9%).

Rural residents, on the contrary, noted that their life has changed for the better (30.3%), but at the same time, the level of concern among rural youth is higher - 23.2% of positive answers versus 18.9% among urban youth. This data is also explainable from the point of view of official statistics, which indicates that the unemployment rate among young people aged 18 to 28 in Kyrgyzstan is 10.8%, with more unemployed youth living in urban areas (7.6%). This fact is due to the high internal migration flow from rural areas to urban. The level of unemployed youth in rural area is 6.8%. During the quarantine period, urban residents have experienced more difficulties.

Compared with the main group, majority of respondents from vulnerable groups noted that no changes occurred in their lives (42.2%).

Moreover, significantly fewer people responded that life had changed for the worse. It should be noted that in fact, in each questionnaire of PWD groups, respondents from the LGBT community, as well as people living with HIV status, there is

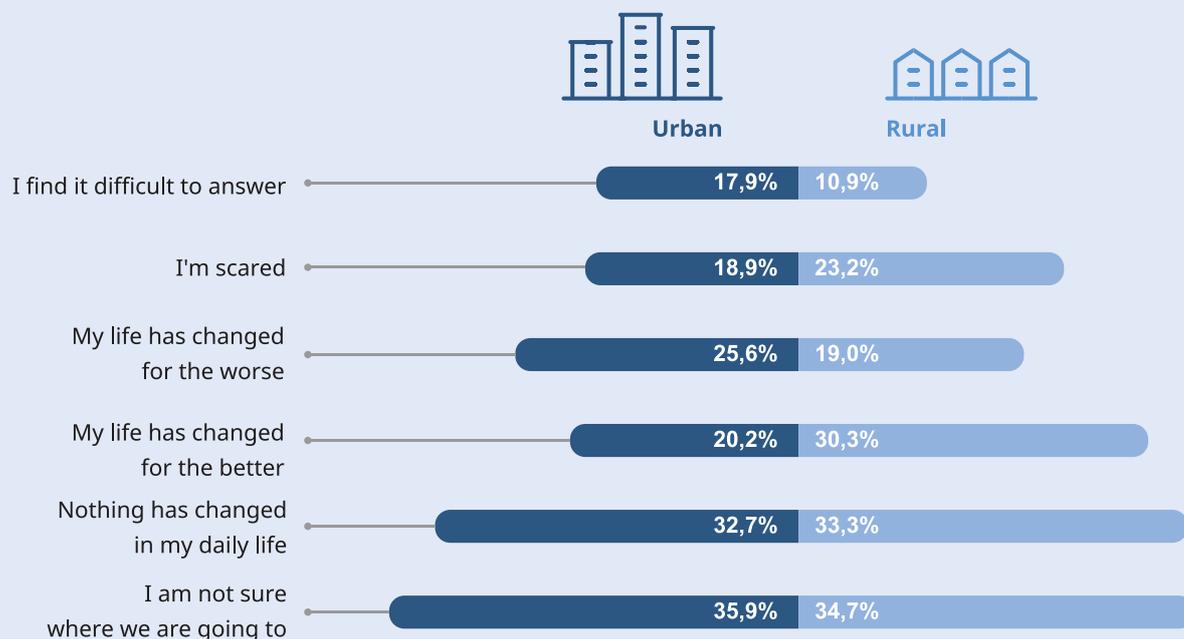
Diagram 37. The impact of coronavirus on vulnerable groups, in %



higher percentage of answers that life has changed for worse. The total number of questionnaires among vulnerable groups used for the present survey is too small, and in the total sample the answers give smaller percentage. In this regard, it is recommended to conduct the additional survey with greater representativeness for these groups.



Diagram 38.
Differences in the perception
of changes by type of location, in %



While the main group was primarily concerned about the health and situation in the country, for the vulnerable group, the question of earnings and impact on work (46.2%) arises right after concerns for health of their family members and friends (63.9%). The third place is occupied by their own health (40.8%). In general, the level of anxiety among vulnerable groups is 5-7% higher than the main group. Vulnerable groups also disagreed that they had lost touch with friends and peers (only 21.1% fully agreed with the

statement). Persons from vulnerable groups face isolation in the workplace even in ordinary life¹ and are more likely to lose their jobs and have difficulty returning to work. Overall, according to the NSC, the number of persons with disabilities receiving pensions and disability benefits was 194364 persons in 2019².

1 <https://social.un.org/publications/UN-Flagship-Report-Disability-Final.pdf>

2 <http://www.stat.kg/ru/news/cifry-i-fakty-statistika-invalidnosti-v-kyrgyzskoj-respublike-infografika/>

RELATIONSHIP WITH FAMILY MEMBERS

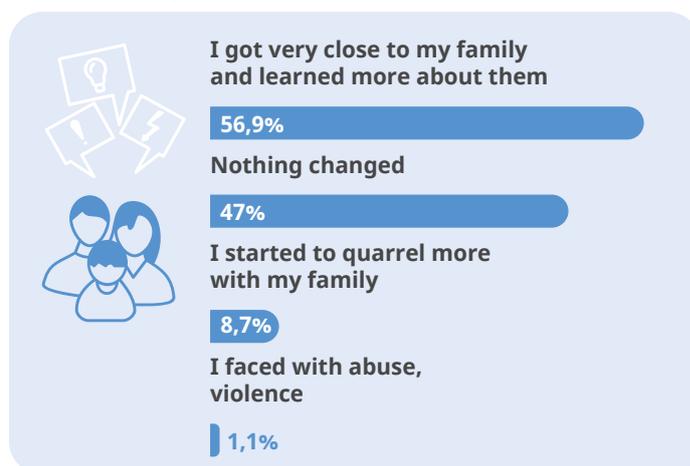
In all countries where the appropriate statistics is run, the violence against women and girls has increased during the pandemic. On average, this figure is 25%¹.

The results of the survey show that only 1.2% of respondents experienced abuse and violence.

At the same time, the country's authorities say that in the Kyrgyz Republic, the increase of violence against women over the same period is equal to 65%². At the same time, data from online and telephone surveys did not reveal any differences. To the question "How did quarantine impact on your relationship with family members?", more than half of the youth responded positively, choosing the answer "I got very close to my family and learned more about them" (56.9%), 47,15% replied that nothing had changed. A small part, 8.7%, started to quarrel more with their family.

Girls more often believe that they became close to their family (62.4%) than boys (49.9%). Boys, on the contrary, more often than girls noted that nothing had changed in their lives (50.7%). Among girls, 44.2% of the respondents did not notice any changes.

Diagram 39. Distribution of responses on impact of quarantine on the family relationships, in %



1 *Domestic Violence Spikes During Coronavirus as Families Trapped at Home* <https://10daily.com.au/news/australia/a200326zyjkh/domestic-violence-spikes-duringcoronavirus-as-families-trapped-at-home-20200327>

2 <https://rus.azattyk.org/a/kyrgyzstan-quarantine-violence/30587379.html>

In all countries where the appropriate statistics is run, the violence against women and girls has increased during the pandemic. On average, this figure is 25%²⁴.

The results of the survey show that only 1.2% of respondents experienced abuse and violence.

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Girls more often believe that they became close to their family (62.4%) than boys (49.9%). Boys, on the contrary, more often than girls noted that nothing had changed in their lives (50.7%). Among girls, 44.2% of the respondents did not notice any changes.

Analysis of data in vulnerable groups shows that, compared with the main group, relationships with family members have changed for the worse. The difference is shown in abuse and violence that vulnerable groups face for 7.5% more often, than the main group. While in the main group, almost half of the respondents noted that nothing has changed in relations with the family, there were more negative changes in the vulnerable groups, and the percentage of respondents who became close to their family was lower for 5-6% than in the main group.



Diagram 40. Correlation of answers on family relationships, by gender, in %

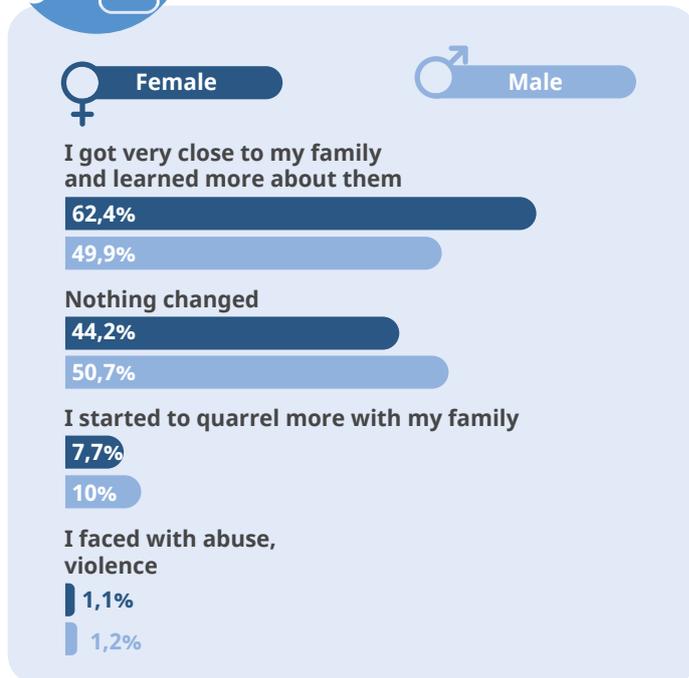


Diagram 42. Distribution of responses on relationship with family members among vulnerable groups, in %

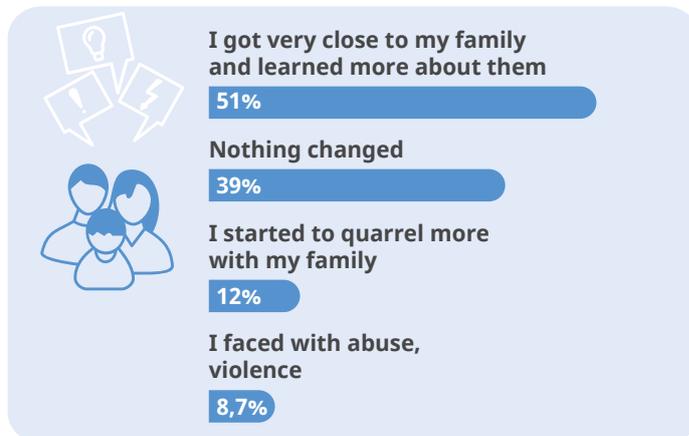
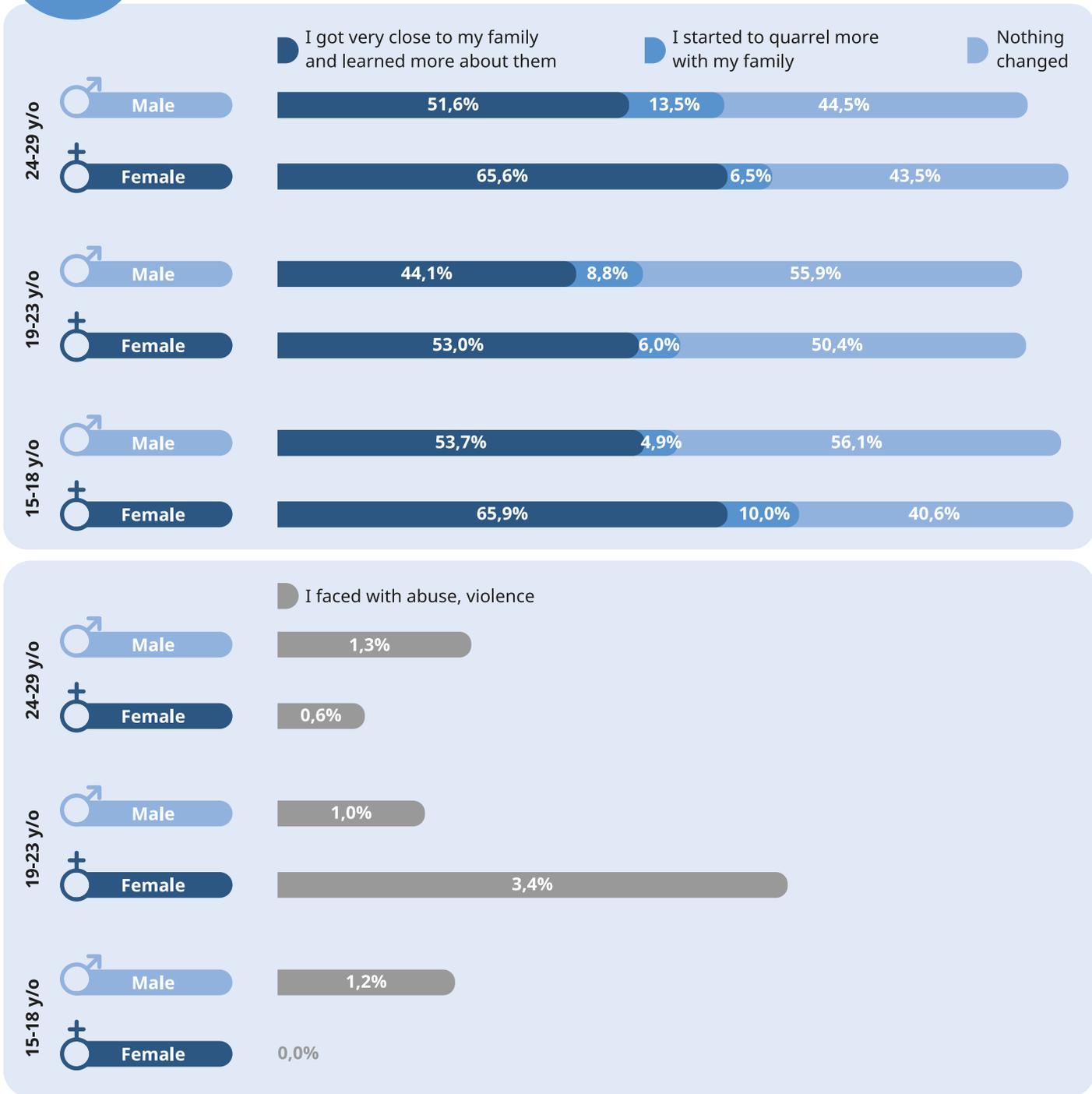




Diagram 41.
Changes in family relationships,
gender differences, in %



HOUSEHOLD DUTIES

Over half of the respondents said nothing had changed when asked how much household duties changed;

44.7% noted that number of duties increased,

and duties have decreased only for 3.6%.

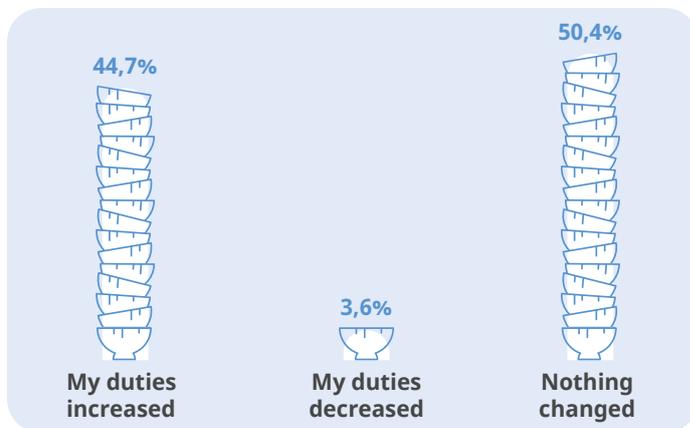
The difference between increasing number of duties between boys and girls is insignificant and come up to 1.5% in favor of girls, however, no other noticeable differences fixed in gender, age and place of residence. Among vulnerable groups, household duties increased by 6% more than in the main group.

Urban youth are experiencing greater pressure due to increase of number of household duties: many noted that they did not have time to complete their tasks.

The most significant gap is observed between urban and rural youths. Young men living in the city noted high rates of declining of academic performance (47.6%), against 18.9% of rural ones.

Urban youths also have problems managing their time (57.1% noted that they have no time), while 77.4% of young men living in the rural area

Diagram 43. Distribution of answers on changing the number of household duties during quarantine, in %



do not feel pressure of time. For girls, rural and urban population show the same performance. However, there is big gap between rural girls and boys, where significantly more girls (32.9%) do not have time to do their school homework.

The urban girls, among working respondents, more often than others answered to the question "How did the household duties impact on your work?", that they did not have time to complete their tasks. 38.7% have significantly increased working hours. In both cases, the indicators are two times higher than that of rural girls - 16.1% and 19.4%, respectively. Also, rural girls have lower rate of ability to effectively manage time (48.4%).



Diagram 44. Differences in changes by gender and type of location, in %

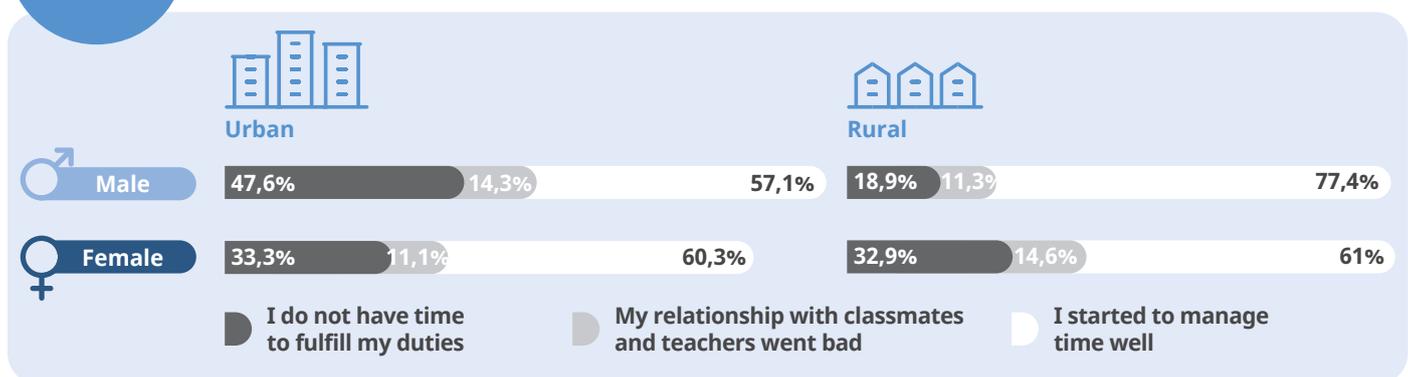
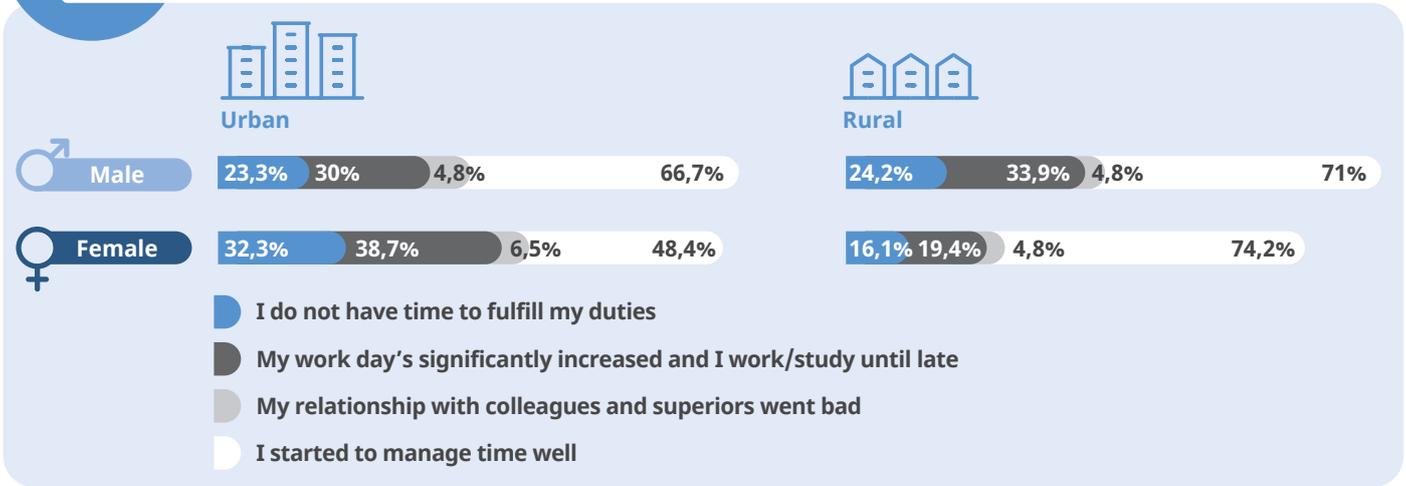




Diagram 45. Differences in changes by gender and type of location among working persons, in %

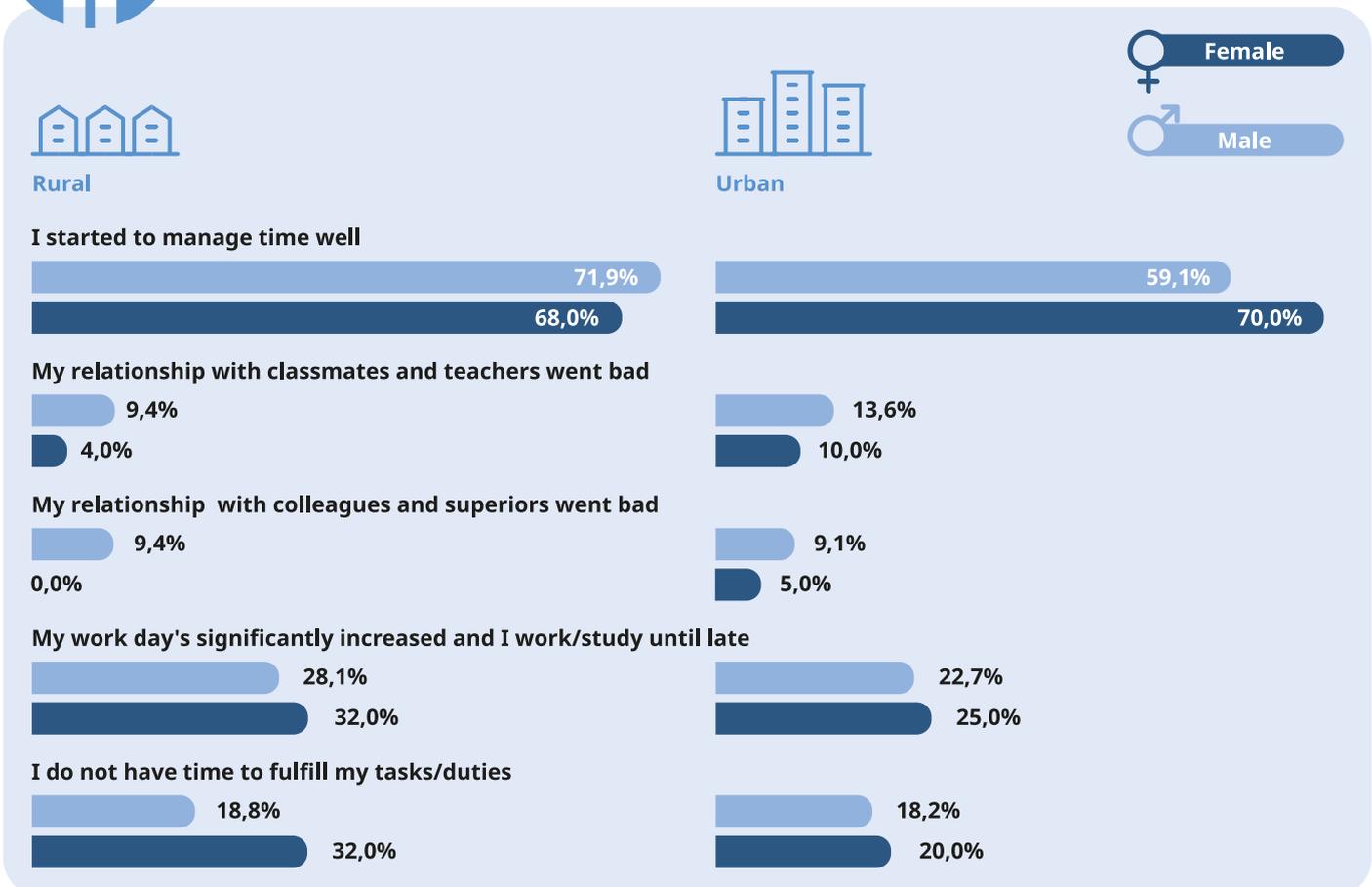


Rural girls are experiencing the greatest stress due to increase of duties number (32.0%), their working day has increased significantly. Boys, on the other hand, are less susceptible to changes in

working hours: only 18.2% of urban and 18.8% of rural boys noted that their working hours became longer.



Diagram 46. Differences in changes by gender and type of residence among working and students, in %



Thus, household duties had the greatest negative impact on urban working girls, and rural girls who study or combine school and work.

impacts on the formal economy. For example, Oxfam estimates that unpaid female labor accounts for 13% of global GDP¹.

Overall, these numbers correlate with global data and show that unpaid domestic work is unevenly distributed between girls and boys, and this work

¹ Interfax-Ukraine, 2017, Women's unpaid work was estimated at 13% of global GDP, Obtained from: <https://interfax.com.ua/news/general/406840.html> (reference date:20.06.2020)

THE EDUCATIONAL PROCESS

This component describes the effect of quarantine on students who are scholars or students, and respondents who combine study and work. To the question, "Was your study interrupted due to outbreak of coronavirus?", the majority responded that the premises of schools/universities were closed, but education process continues online (students -87.9%, students and working - 81.6%). Among students and working, 10.9% said that learning process continues, as before.

The rates of rural youth online education are lower than for urban students (85.4% of rural students versus 92.0% of urban students,

the same ratio remains among students and working), despite the closure of the premises. 4.9% of students and 6.7% of students and working respondents in rural areas reported that their studies had completely stopped due to closure of the premises.



Diagram 47.
Changes in the educational process, in %

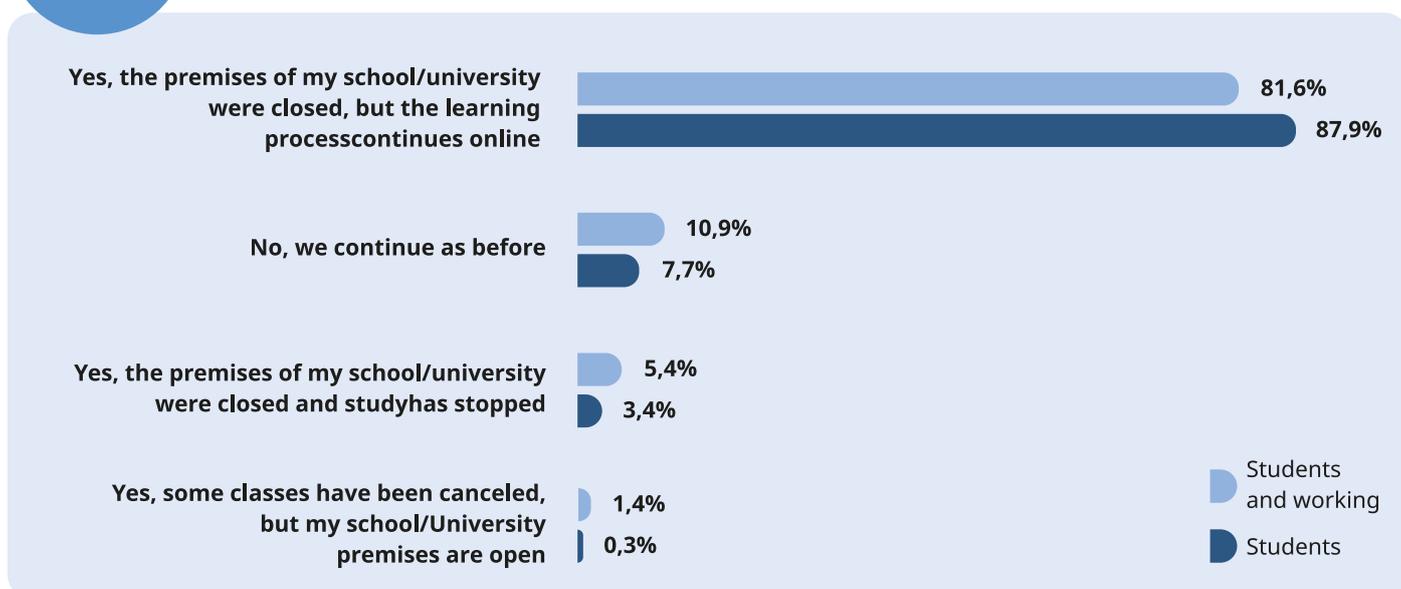
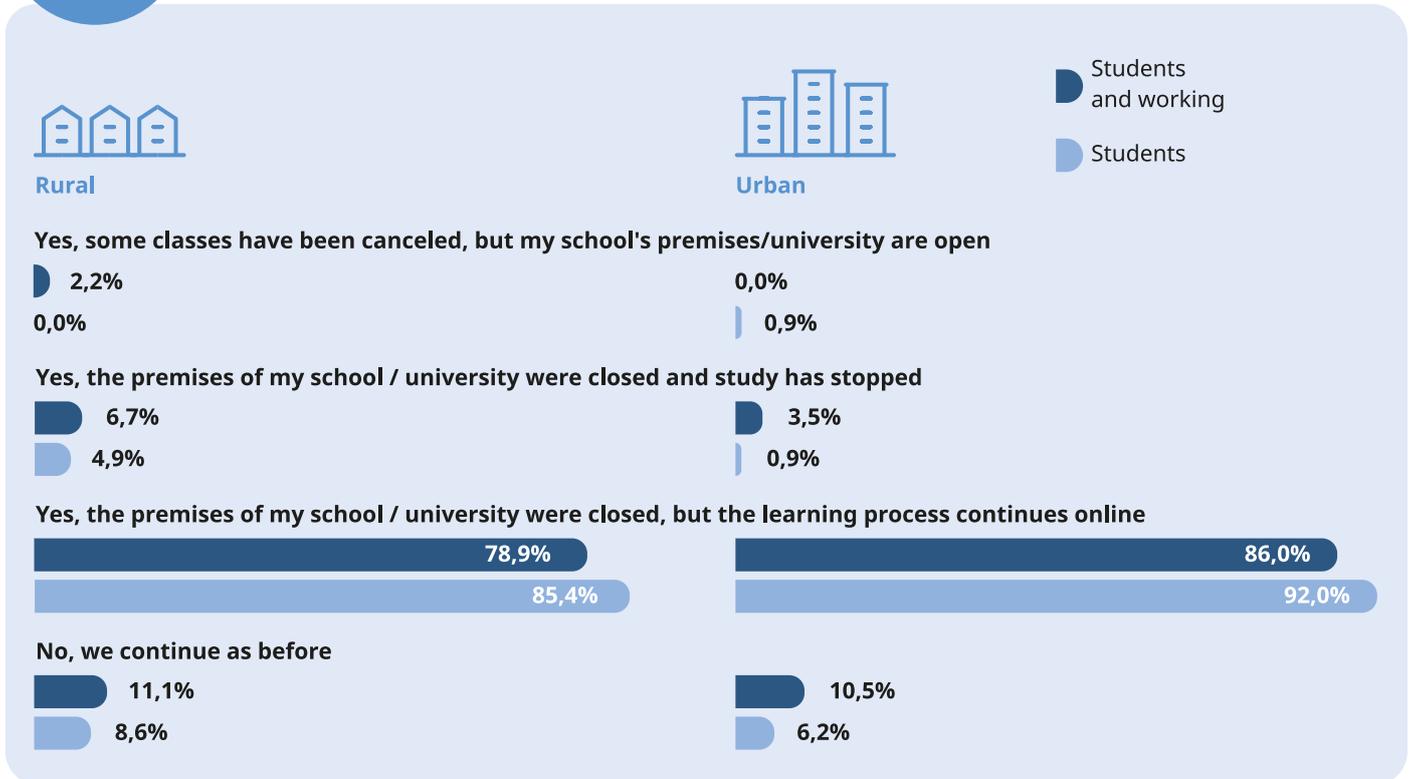




Diagram 48.
Changes in the educational process
by type of locality, in %



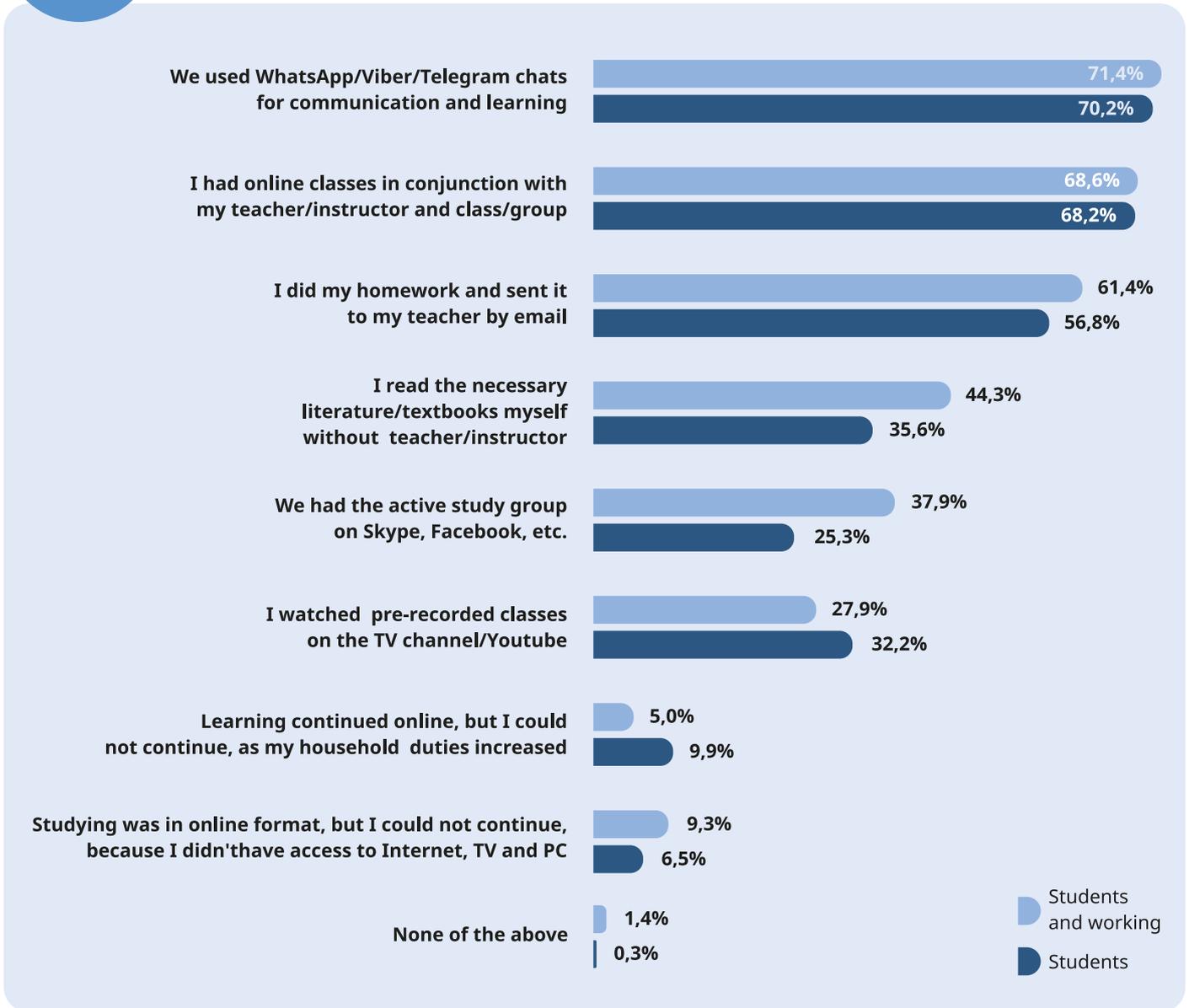
During quarantine, the most popular resources for organizing the educational process were WhatsApp, Viber and Telegram messengers (students - 70.2%, students and working - 71.4%), online classes with teacher/ instructor and class/ group (students - 68, 2%, students and working - 68.6%), and self-fulfillment of homework and sending to the teacher by e-mail (students - 56.8%, students and working - 61.4%). 9.9% of students

and 5.0% of students and working were unable to continue their studies, as domestic duties have increased.

6.5% of students and 9.3% of combining work and study were unable to continue their studies due to lack of access to the Internet, TV and PC.



Diagram 49.
Learning process in quarantine period, in %



The educational process was going the same way regardless of gender and place of residence of the respondents. The only difference is that girls among students and working preferred to send homework using email - 70.8% of girls among students versus 54.1% of boys and 58.7% of girls

among students and working versus 53.7% young men from the same reference group. Also, girls from both groups preferred pre-recorded classes on the TV/ Youtube channel, average of 7-10% more than boys from the same reference group.



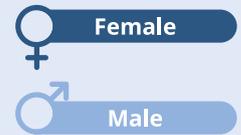
Diagram 50.
Learning process during quarantine by gender, in %



Students and working



Students



We used WhatsApp/Viber/Telegram chats for communication and learning



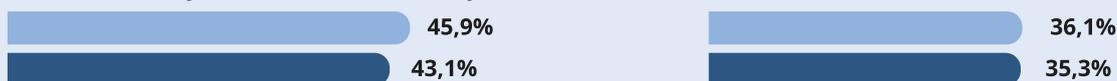
I had online classes in conjunction with teacher/instructor and class / group



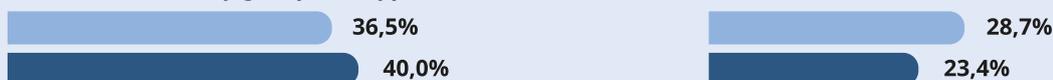
I did my homework and sent it to my teacher by email



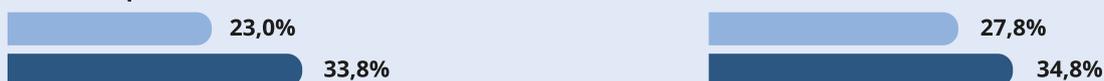
I read necessary literature/textbooks myself without teacher/instructors



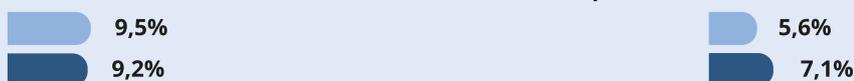
We had active study group on Skype, Facebook, etc.



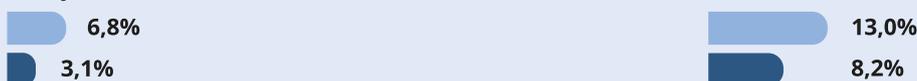
I watched pre-recorded classes on the TV channel/Youtube



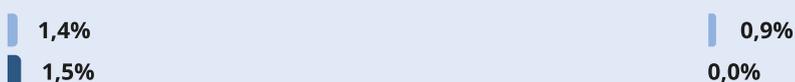
Studying was in online format, but I could not continue, because I didn't had access to Internet, TV and computer



Studying continued online, but I could not continue, as my household duties increased



None of the above



Analysis by gender and by place of residence shows that, in general, domestic duties have negatively affected the education of rural youth among students during quarantine.

Among students and working, there is a little difference between rural and urban youth, the remarkable point is that, most of all, urban boys noted that their household duties increased (13.2%). More boys compared to girls noted that their domestic duties adversely affected the learning process.

The increase of household obligations is proportional to age: the older the youth, the more household duties have affected the learning process.

Rural boys among students mostly noted, that lack of access to technology did not allow to continue studies during quarantine (13.0%), while more urban girls from the same reference group responded in similar way (10.7%).

Urban boys among students had fewer problems with access to technology (3.6%).

To the question, "Do you think outbreak of infection affected your academic performance?", both groups (students, students and working) answered, that academic performance remained as before - 76.6% and 71.6%, respectively. 15.4% of students and 17.6% of students and working said that they quite far behind the curriculum.



Diagram 51.
The effect of household duties and access to technology on learning during quarantine, by gender and place of location, in %

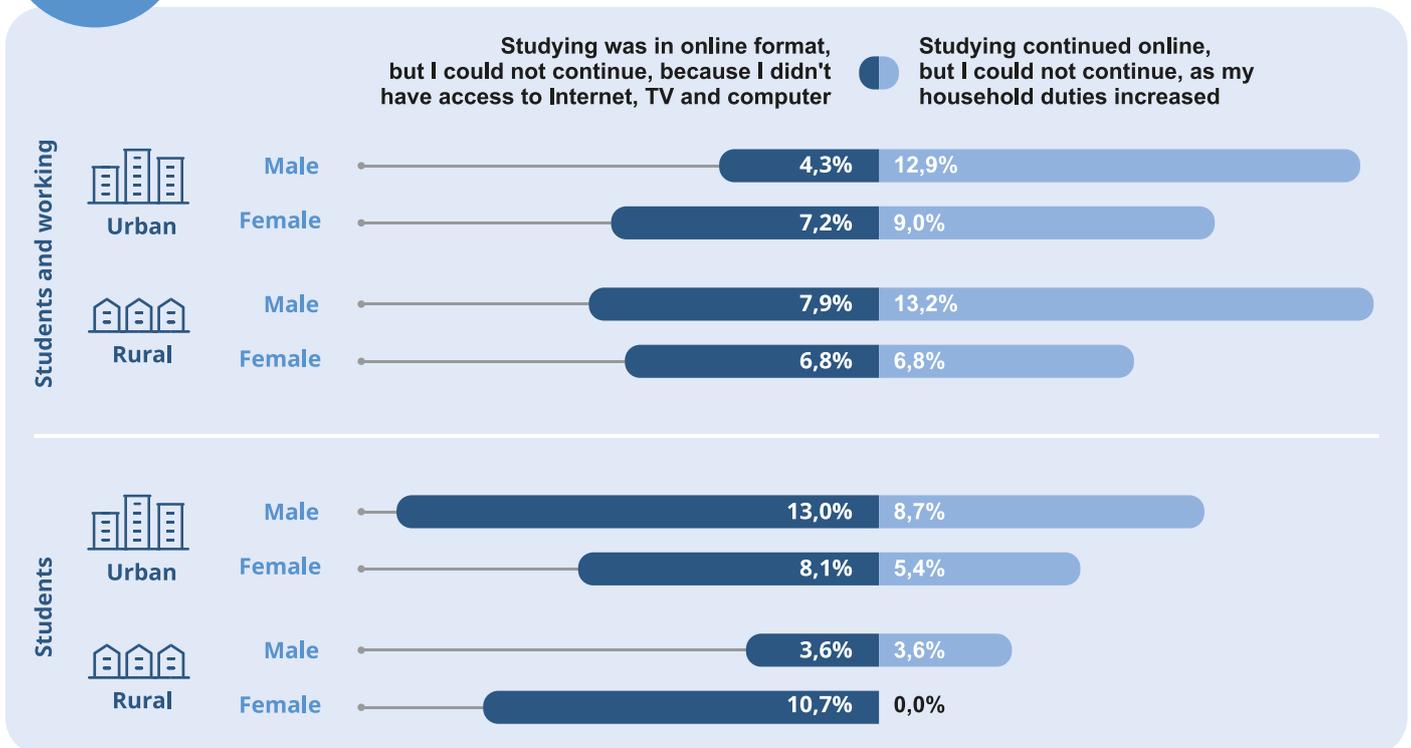
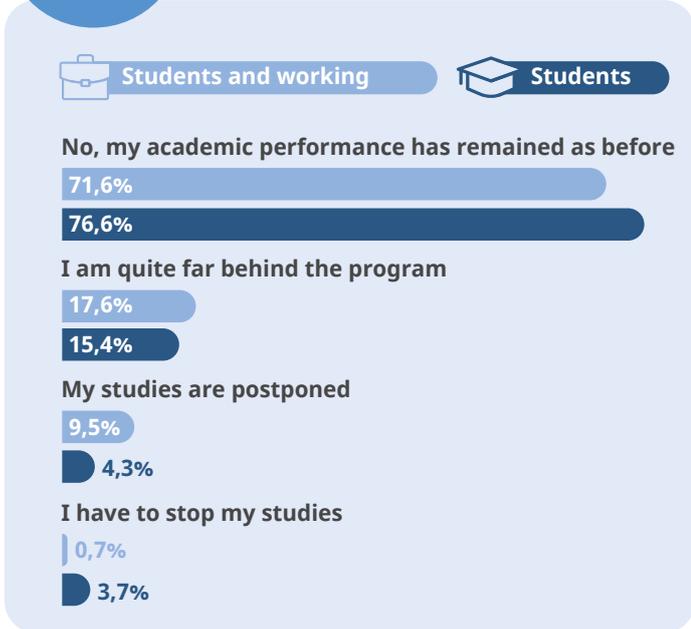




Diagram 52. Distribution of answers according to the effect of quarantine on academic performance, in %



There are no special differences in gender context, but more young men noted that studies were postponed. 6.4% of boys among students postponed their studies against 3.3% of girls, 14.5% of boys among students and working against 4.3% of girls in the same reference group did the same. However, due to the small sample, these indicators are not statistically significant.

Rural youth performance indicators are slightly lower than urban indicators.

Less rural residents noted that academic performance remains the same (74.1% among students in rural areas versus 80.7% in urban, and 65.2% among students and working in rural areas versus 81.4% in urban). Also, young people in rural areas noted that they are slightly more behind the curriculum (17.8% among students in rural areas versus 11.4% in urban and 20.2% among students and working in rural areas against 13.6% in urban).



Diagram 53. Changes in academic performance during quarantine, by gender in %

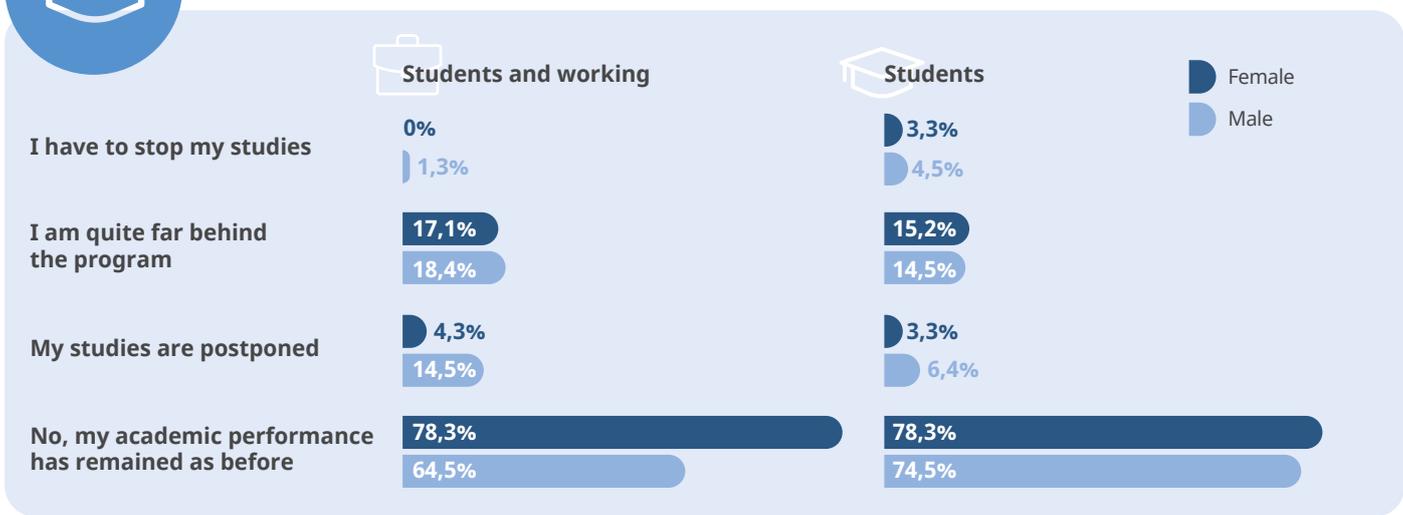
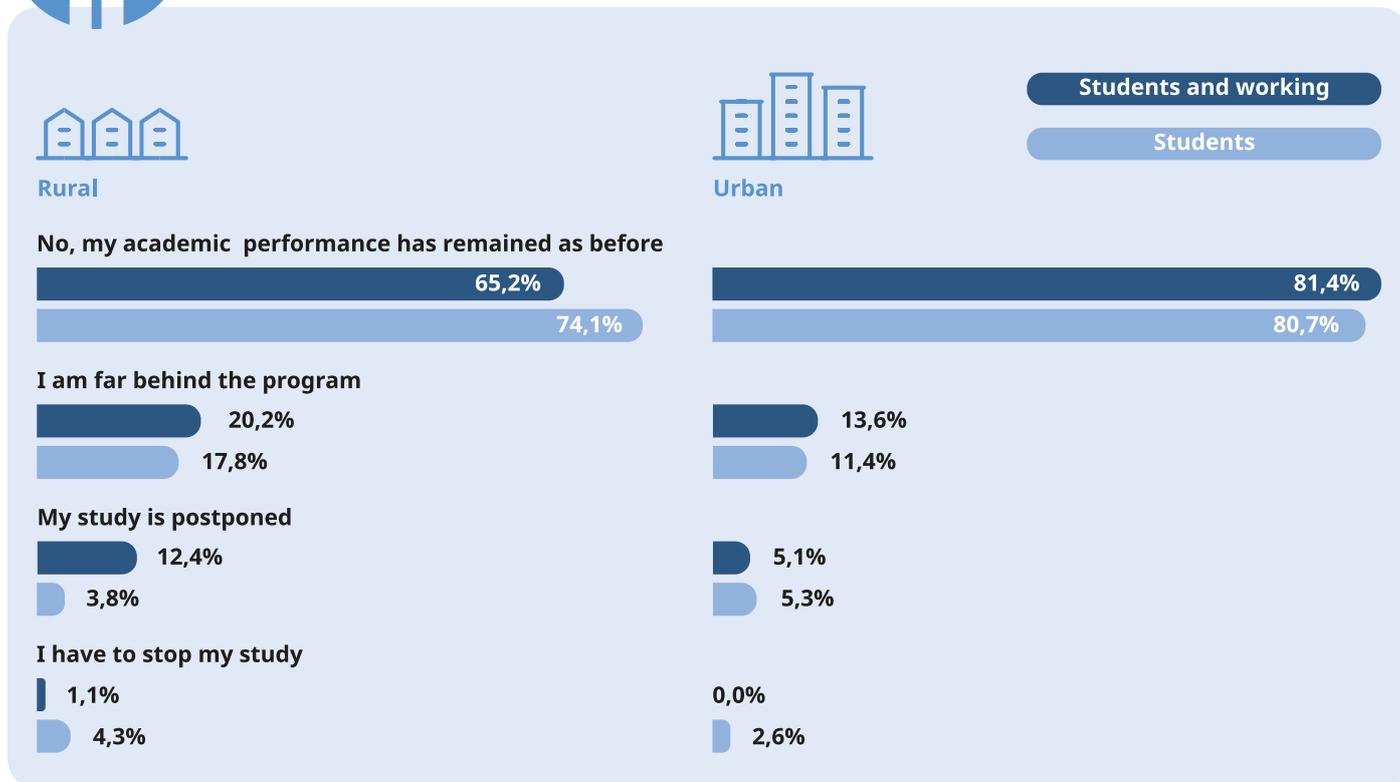




Diagram 54.
Changes in academic performance,
by type of location, in %



Most of the students (41.3%) said they would get self-education during the summer holidays, while students and working replied that they would either look for part-time jobs in various fields (28.7%) or engage into self-education (27.3%). By gender, there are differences among students: girls more intend to have rest (26.9% versus 13.5% of boys), while boys intend to look for part-time job (26.0% versus 16.5% of girls).



Diagram 55.
Distribution of answers according
to plans for summer, in %



INCOME AND LABOR ACTIVITY

More than half of the respondents noted about the decrease of income after the outbreak of coronavirus, while 18.1% estimate this decrease as significant and 34.5% as insignificant.

32.6% of respondents' income remains the same, and only 3.1% noted the increase in family income. The question was not asked among the unemployed, who make up 17.2% of all respondents.

Assessment of the income level by girls and boys does not show a significant difference, slightly more boys noted the significant decrease of income (20.2% of boys versus 16.3% of girls), however, more girls do not know about family income (7.5% of girls versus 4, 5% of boys). It should be noted that respondents who did not study or work, as well as minors, were not asked the question "What does your family's current income consist of?"

Based on the answers of majority of respondents, the main sources of income are: wages - 43.9% and livestock and agriculture - 35.5%. In terms of gender, there are no special differences - incomes of both sexes decreased equally.

Diagram 56. Distribution of answers on changes in family income since the outbreak of coronavirus, in %

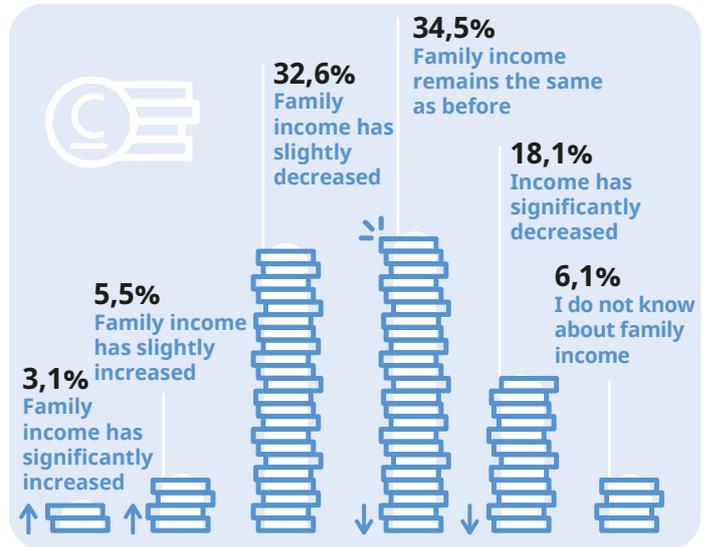


Diagram 57. Correlation of changes in family income by answers, by gender, in %

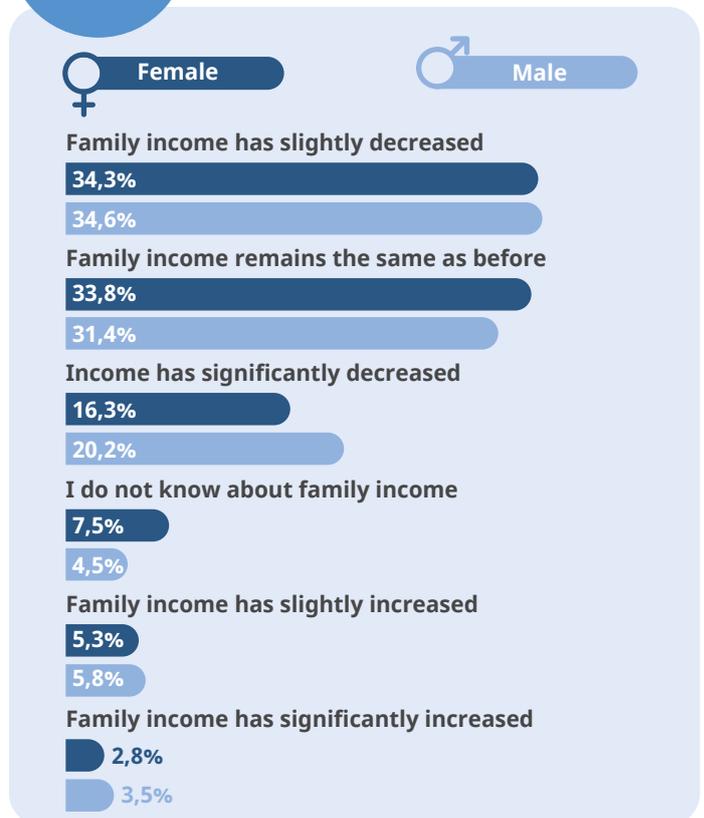
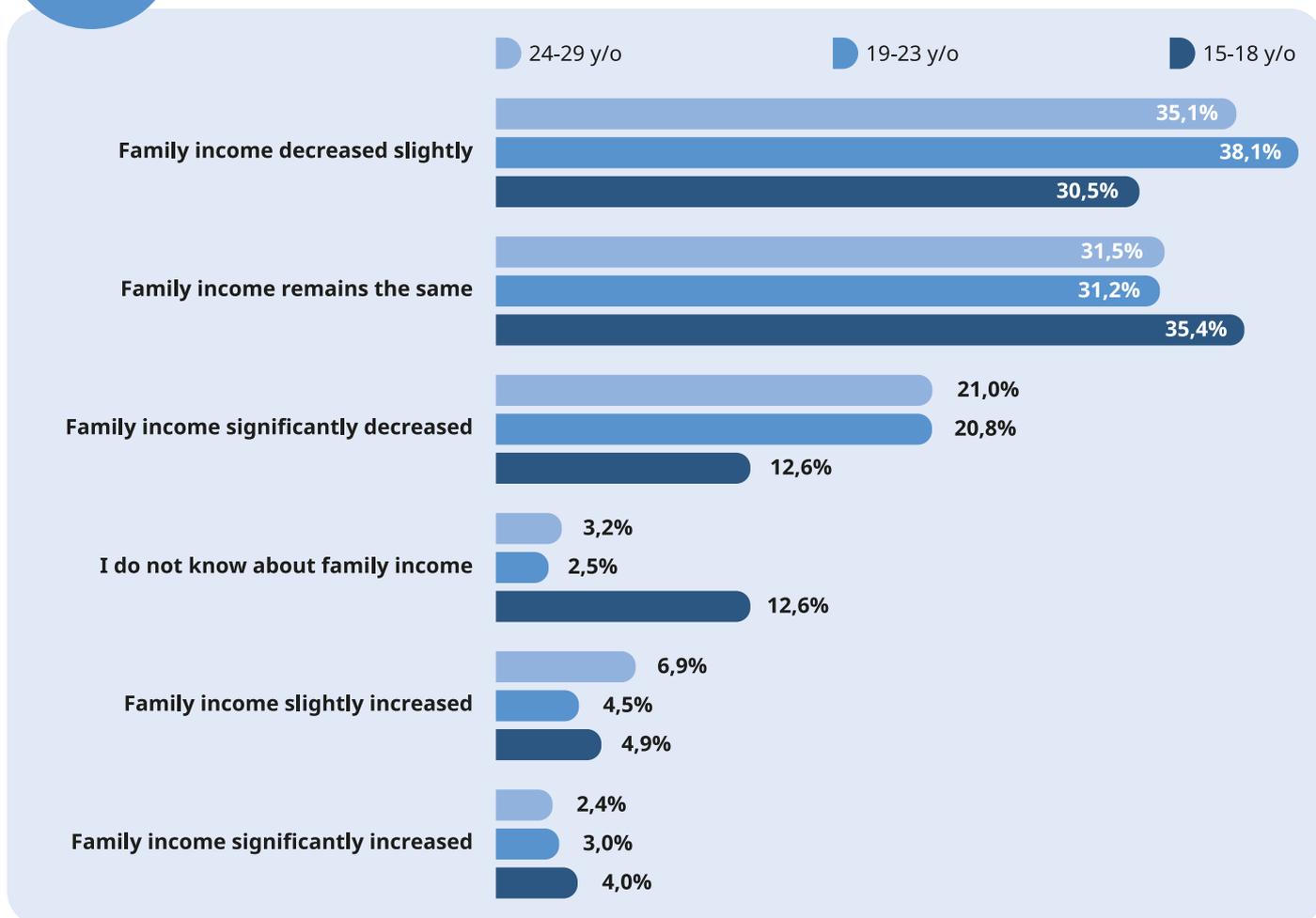




Diagram 58.
Changes in family income,
by age, in %



Young people aged 19-23 noted decrease of income most of all (20.8% - decreased significantly and 38.1% - slightly decreased). 12.6% of adolescents do not know about family income. Analysis by gender and age group shows that girls aged 19-23 and boys aged 24-29 years old, experienced most in significant decrease of income - 23.5% and 24.9%, respectively. Girls aged 15-18 are more likely to be unaware of family income (14.3% versus 9.2% of boys).

As in the case of income, the majority of respondents noted that there were no changes in their work activity (34.5%). 27.1% noted decrease in the intensity of labor activity, but they did not lose their jobs. The significant percentage of respondents noted the increase in the intensity of labor activity (18.1%), 7.4% lost their jobs and 11.7% were engaged in unpaid work at home and in the household.

Diagram 59. Distribution of answers on changes in labor activity, in %

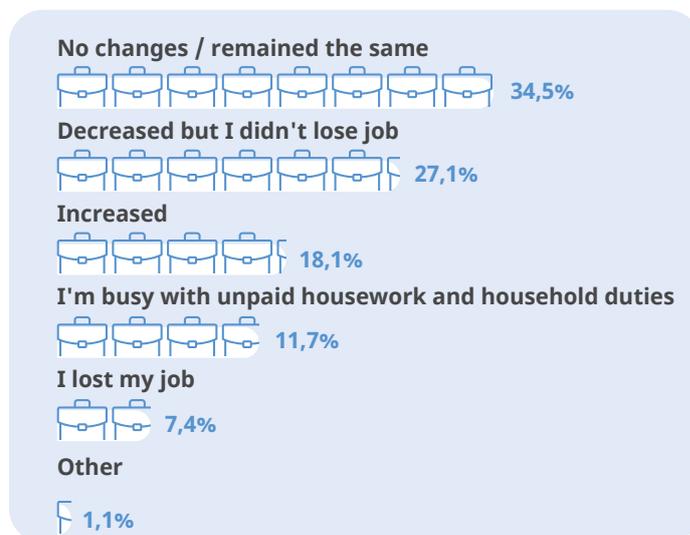
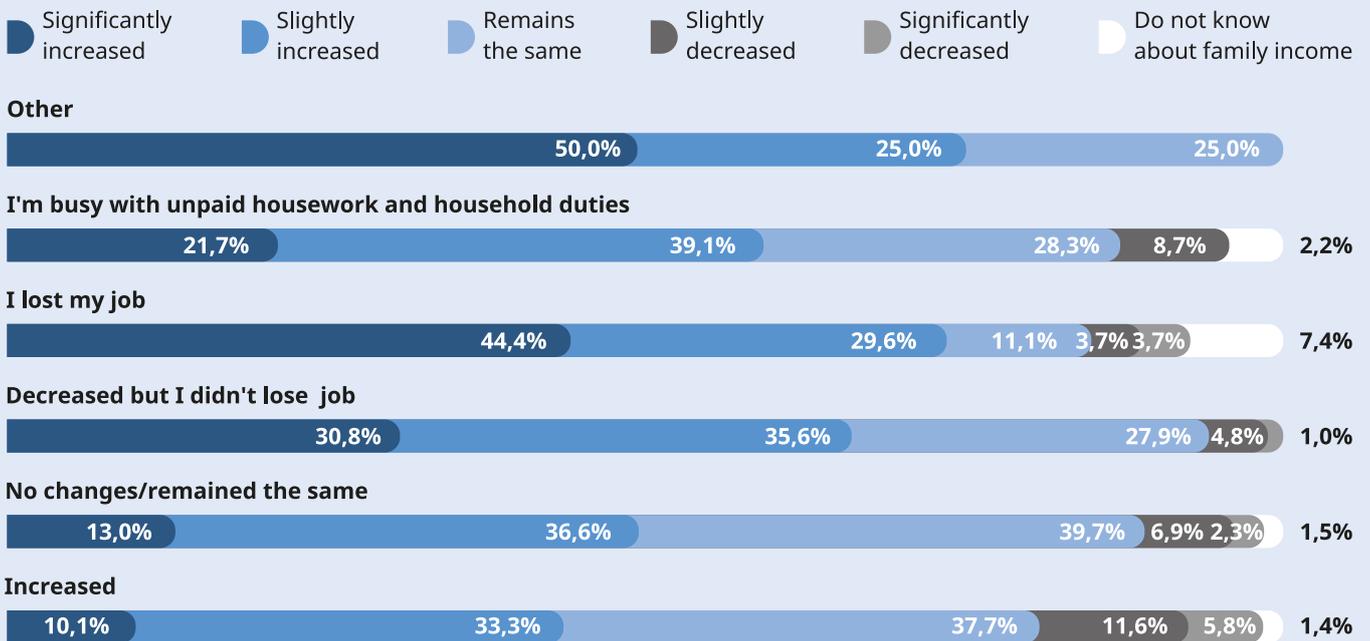




Diagram 60.
Correlation of income and work activity, in %



The correlation of work and income is largely proportional.

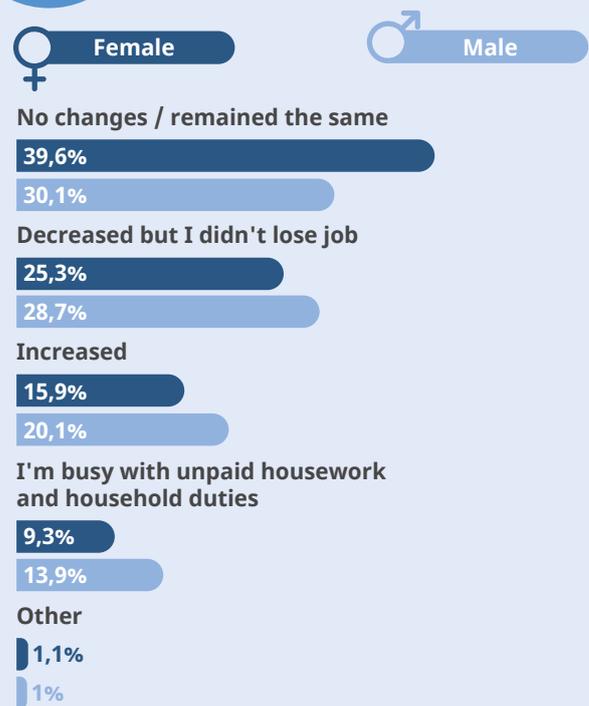
The greatest losses were incurred by respondents who lost their jobs in whole or in part (44.4% significantly and 29.6% - slightly).

It is noteworthy that the income level did not change among the respondents who noted the increase in the number of jobs (37.7%), or it decreased on a par with other respondents who lost their jobs. Thus, it can be concluded that during the quarantine period, increase in the intensity of labor activity did not lead to increase of income.

The volume of labor activity did not change for 39.6% of girls. At the same time, 2.6% more girls lost their jobs than boys. Conversely, 3.1% more young men noted that they were able to keep their jobs, despite decrease in the intensity of labor activity. It is noteworthy, that 4.6% more boys reported on increase of number of unpaid household duties.



Diagram 61.
Correlation of changes in labor activity by gender, in %



Young people aged 19-23 noted decrease of income most of all (20.8% - decreased significantly and 38.1% - slightly decreased). 12.6% of adolescents do not know about family income. Analysis by gender and age group shows that girls aged 19-23 and boys aged 24-29 years old, experienced most in significant decrease of income - 23.5% and 24.9%, respectively. Girls aged 15-18 are more likely to be unaware of family income (14.3% versus 9.2% of boys).

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In the context of urban and rural, urban youth much more experience increase in labor activity (27.0% versus 12.8% of rural youth). At the same time, we see that the labor activity of the majority of rural youth has not changed (37.0%), and the respondents kept their jobs, despite the decrease in its number (29.2%). It can be explained by the fact that majority of rural youth are employed in agriculture and under conditions of quarantine their labor activity has changed slightly.

In general, analysis of responses shows that the distribution of work safety concerns is proportional. 35.3% of young people are worried about the future of their work due to the outbreak of coronavirus. 33.9% of young people are optimistic about employment.



Diagram 62. Correlation of changes in work activity, by place of location, in %

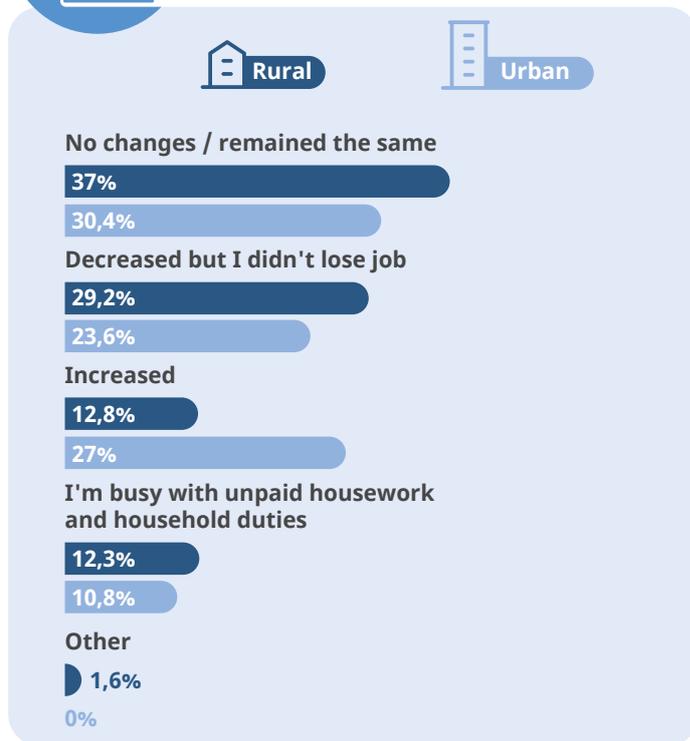
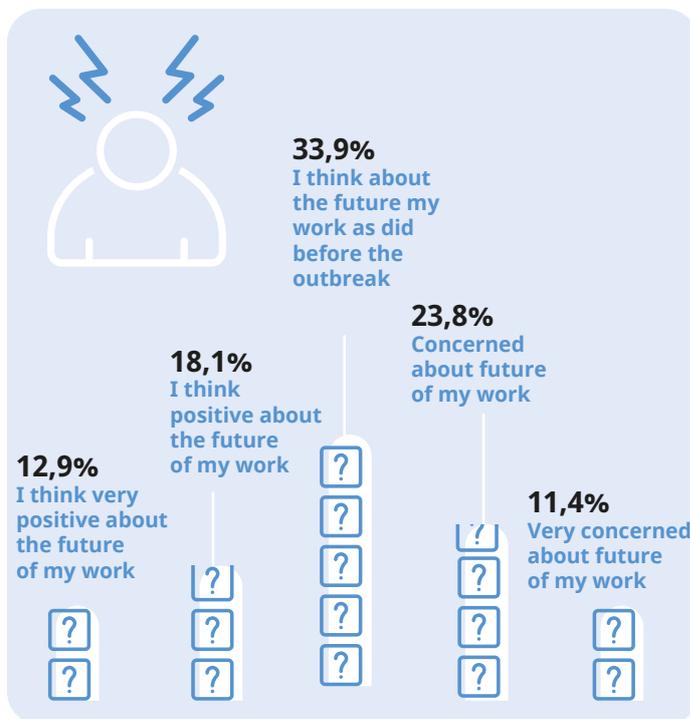


Diagram 63. Distribution of responses on concerns about the future of their work due to outbreak of coronavirus, in %



Despite the insignificant difference, you can still see more concern by girls: 7.0% more girls worry about the future of their work, while 8.3% more boys did not change their minds.

The level of concern is proportional to age: the older the youth, greater the level of concern. 40.1% of young people aged 24-29 are worried about the future, while almost the same percentage of young people aged 15-18 are positive about their work after outbreak. This can be explained by fact that adolescents rely more on their parents, while older young people must earn and support their families.

Diagram 64. Correlation of concerns about the future of their work due to the coronavirus outbreak, by gender, in %



Diagram 65. Concerns about the future of their work due to the outbreak of coronavirus, by age, in %

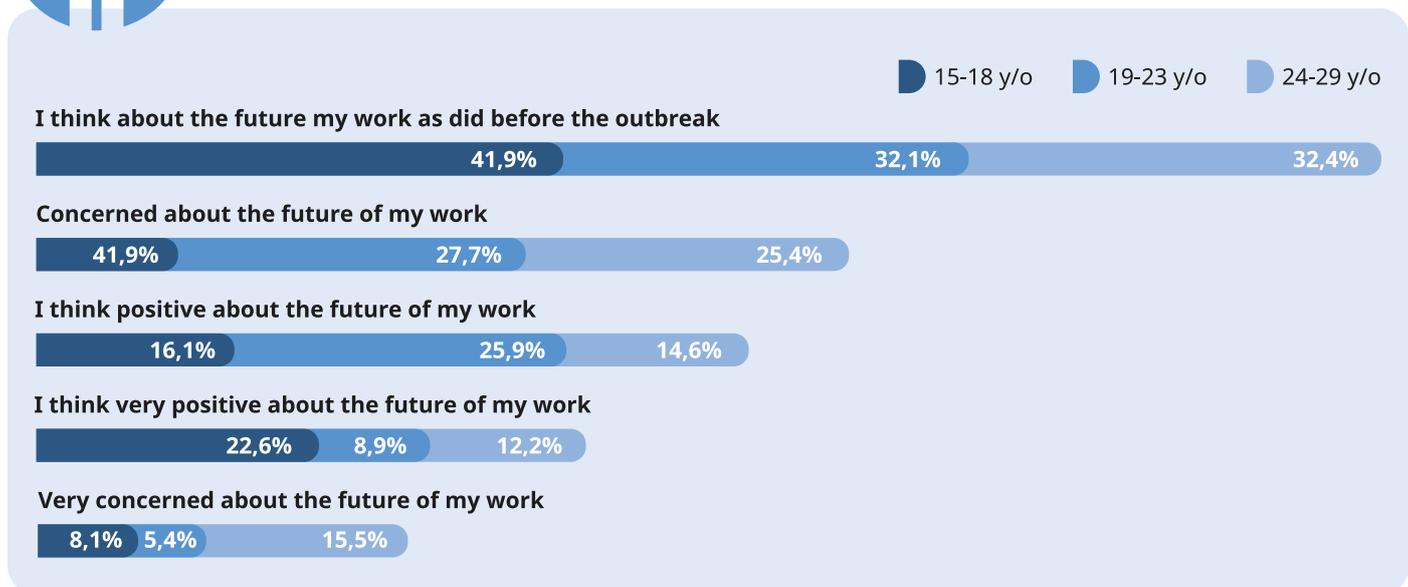
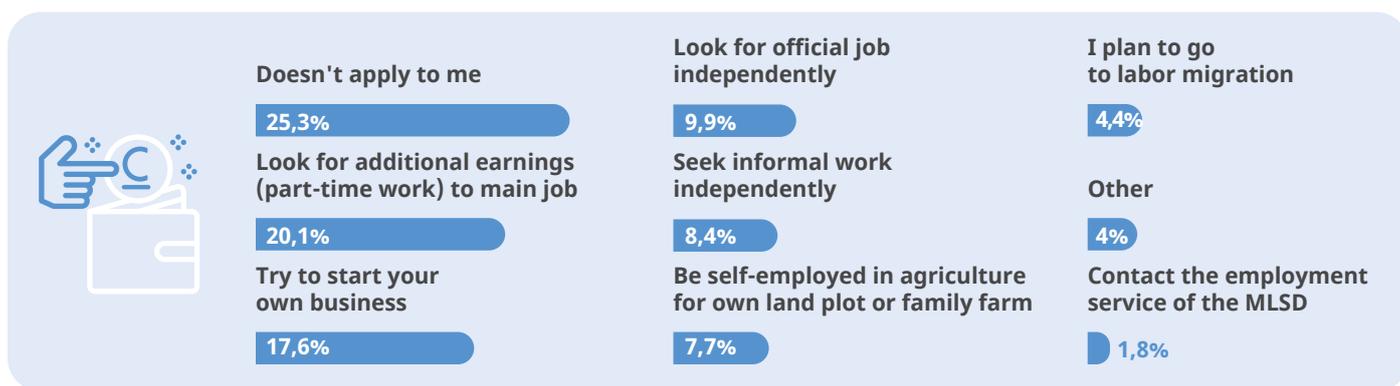


Diagram 66.
How do you plan to recover your income after the pandemic? In %



One quarter of young people whose income decreased, have no plans to recapture their earnings.

The most popular plan to recapture income is to look for additional income (part-time work) to their main job (20.1%) and try to start their own business (17.6%). Only 18.3% of young people were going to look for job (formal and informal). The percentage of young people who plan to migrate was 4.4%, and those who plan to contact the MLSD service - 1.8%.

In the dynamics of urban and rural, search for additional earnings (part-time work) to main job is a popular method for all categories of respondents. Then, the main plan for urban youth is to look for official or unofficial job (23.3%) and try to start own business (14.4%), and for rural youth - attempt to start own business (19.1%) and be self-employed in agricultural sector (9.8%).

In terms of income, vulnerable groups assessed their position rather positively in comparing with main group. In this group, 4.8% more respondents noted the significant increase of income. Regarding the decline of income, representatives of vulnerable groups and the main group show the same indicators, however, the percentage of respondents who do not know about family income is two times higher in vulnerable groups.

With regard to labor activity, there are also positive trends in vulnerable groups - the volume of labor activity increased by 7.5% compared to the main group. Also, 7% fewer respondents noted that their work intensity decreased, but they did not lose job

Diagram 67.
How do you plan to recapture your income after the pandemic? By gender, in %

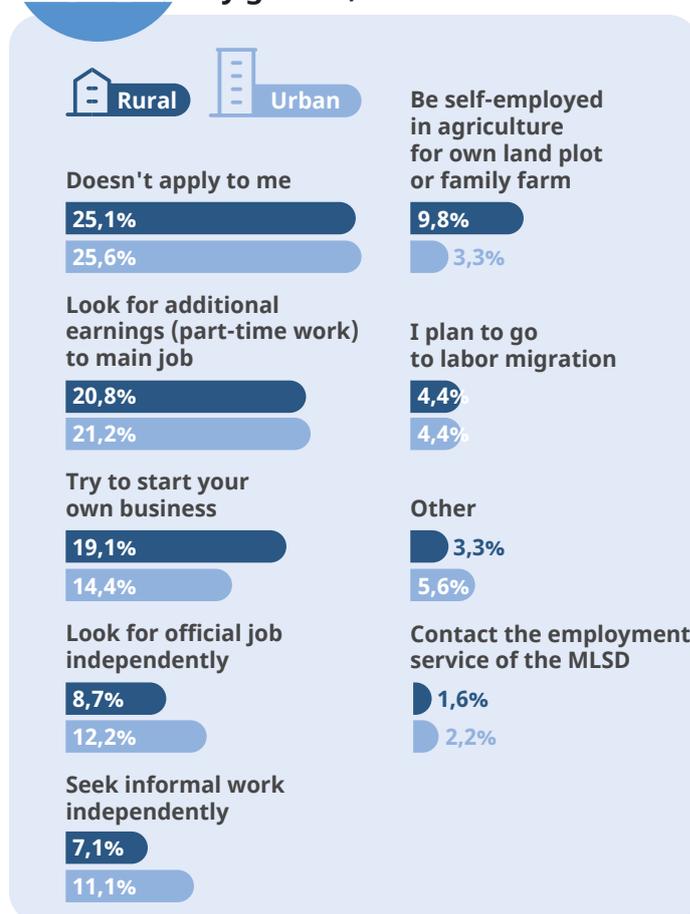




Diagram 68.
How do you plan to recapture your income after the pandemic?
 by gender, in %

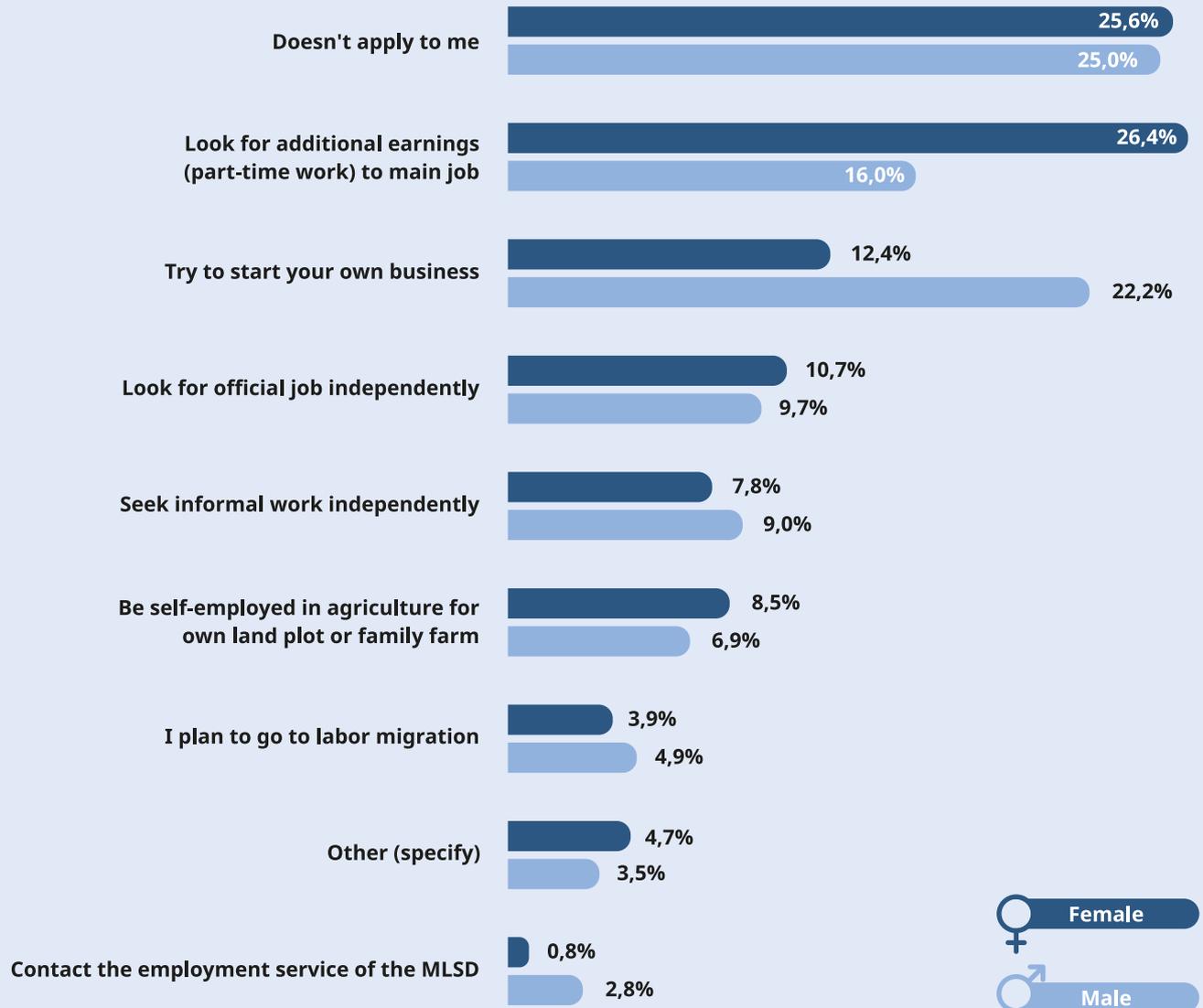




Diagram 69.
How did you and your family's income changed since the start of the coronavirus outbreak? in %

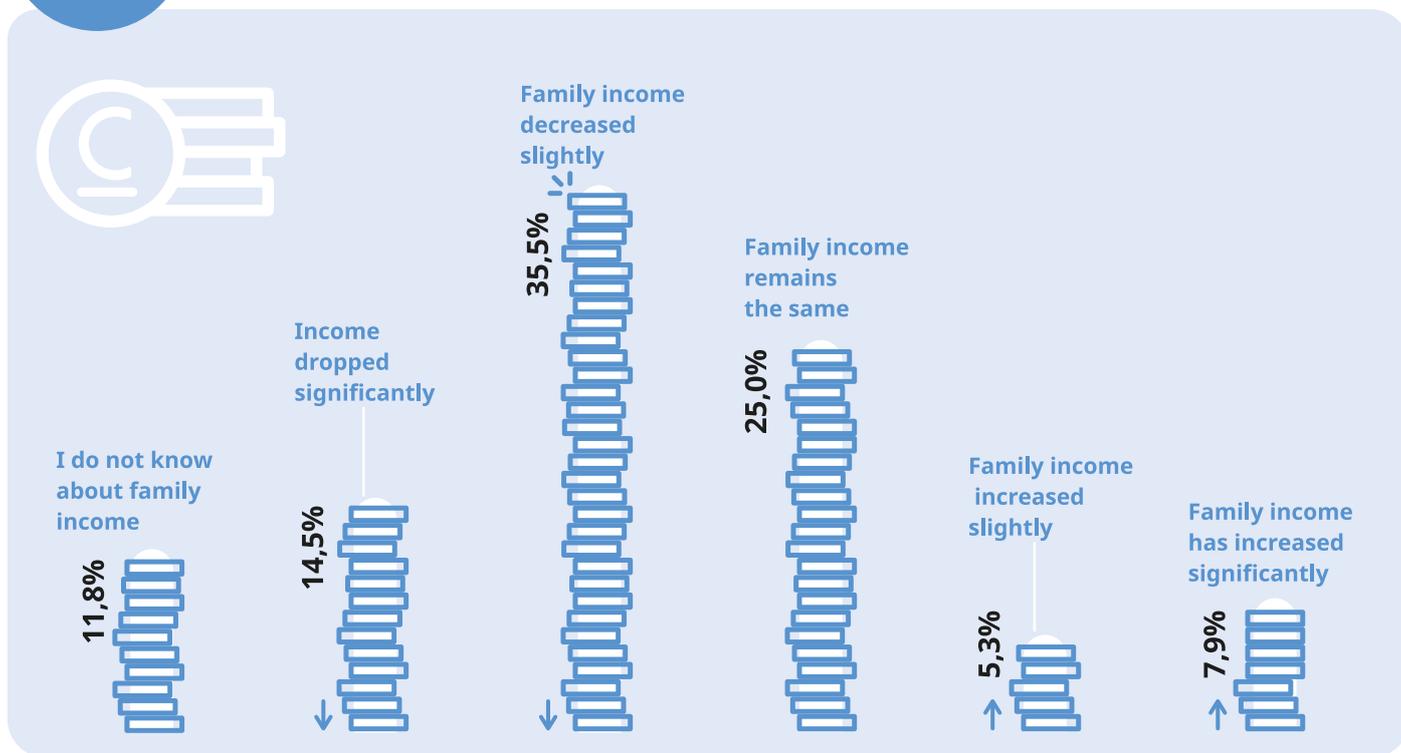
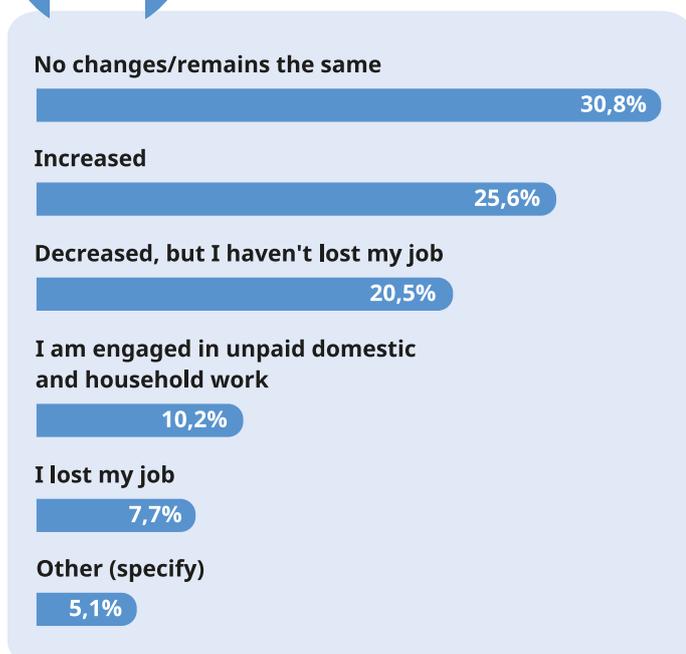


Диаграмма 70.
How has your work activity changed since the spread of COVID-19? In %



UNEMPLOYED

12.2% of young people did not study and work at the survey period. At the same time, 21.3% noted that they were unemployed and before the outbreak of infection, 10.7% lost their jobs, and 18.0% of respondents stopped work due to quarantine. 16.0% answered that they did not need to work, as they live in abundance.

In gender dynamics, one can see that almost one third of girls were unemployed before quarantine started and 10.9% did not work for family reasons (pregnancy, taking care for elderly parents, etc.), while significantly more boys lost their jobs (16.3%), or their work temporarily stopped (22.4%), or their job searches are unsuccessful (14.3%).

Diagram 71.
Reasons for lack of job at the survey period, in %

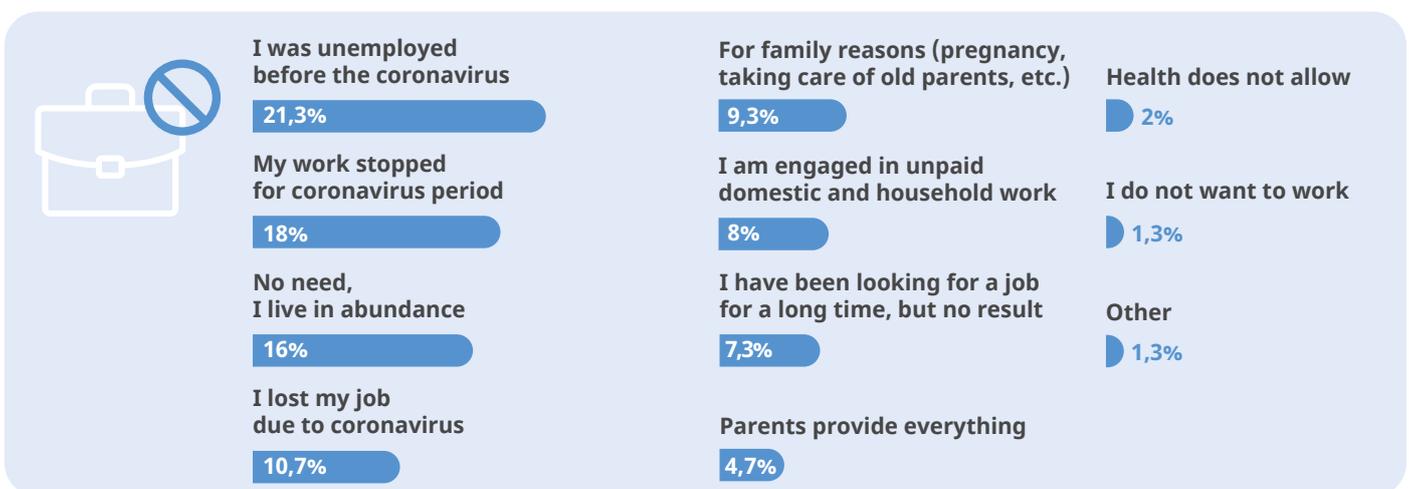
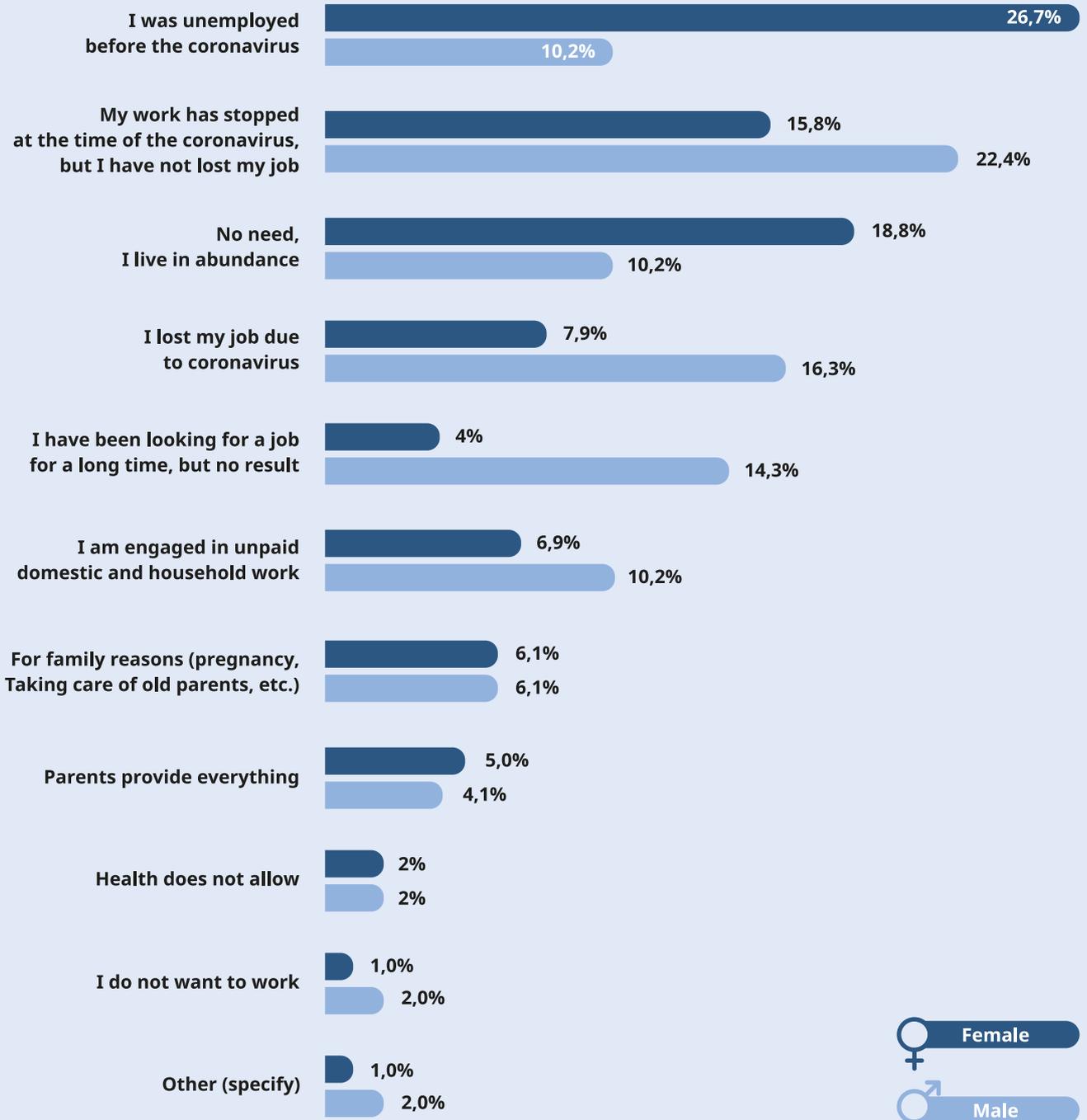




Diagram 72.
Reasons for lack of job at the survey period,
by gender, in %



The main sources of family income for respondents who did not work are the wages of relatives (30.9%), livestock production, agriculture (25.8%) and their own business (20.6%). Labor migration and pensions account for 22.7% of total income.

If we consider the plans of unemployed youth after the pandemic, job search comes out on top (23.7% - official and 8.2% - unofficial). A fairly significant part of young people do not know what to do (21.6%). In our opinion, this is fairly large figure, also affecting the level of anxiety. Other popular plans are attempts to start own business (13.4%) and to be self-employed in agriculture (11.3%).

Diagram 73.
Sources of income of your family, in %

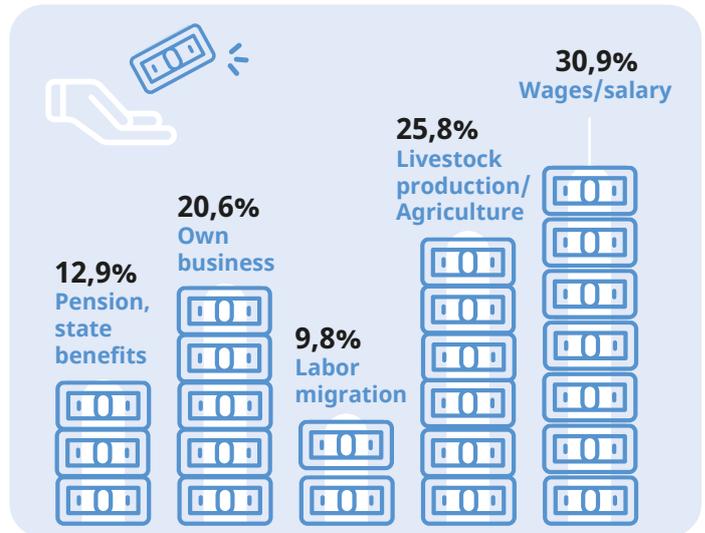
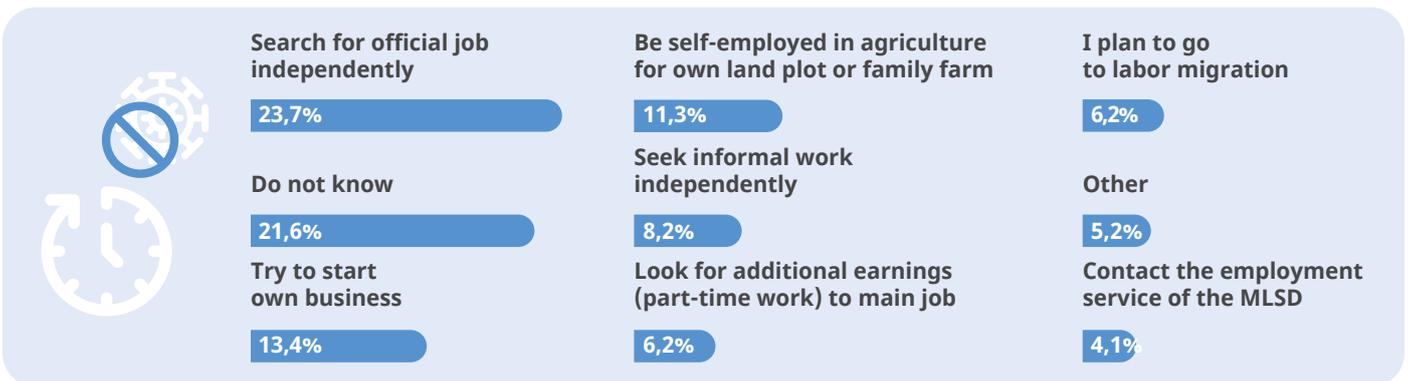


Diagram 74.
What are your plans after the pandemic? In %



Almost one third of the girls do not know what they will do after quarantine. This indicator is three times higher among girls, than boys.

After that, both genders have plans to find work (formal and informal). Young men have more diverse plans - try to start own business -17.6%, to be self-employed in agriculture - 17.6% and go to labor migration - 14.7%. Compared to boys, only 1.6% of girls are planning to go for labor migration. In this regard, it is recommended to consider special measures within the framework of developed program to support women's

entrepreneurship.

Among vulnerable groups, the main reason why respondents did not work is their health status - 66.7%. Loss of work, satisfactory financial situation provided by relatives and other reasons have the same ratio in the structure of respondents' answers.



Diagram 75.
What are your plans after the pandemic?
By gender, in %

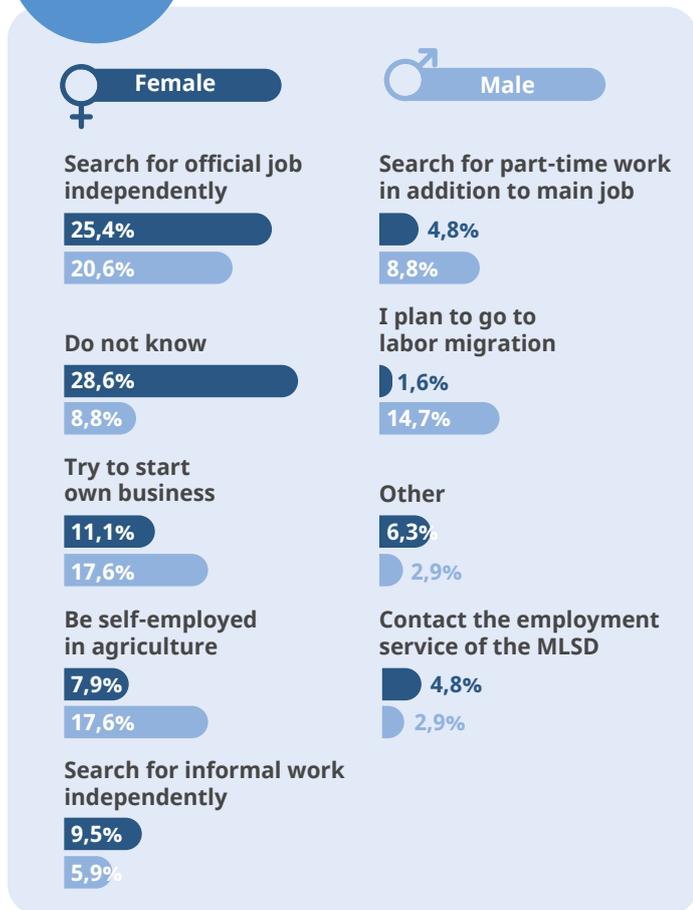
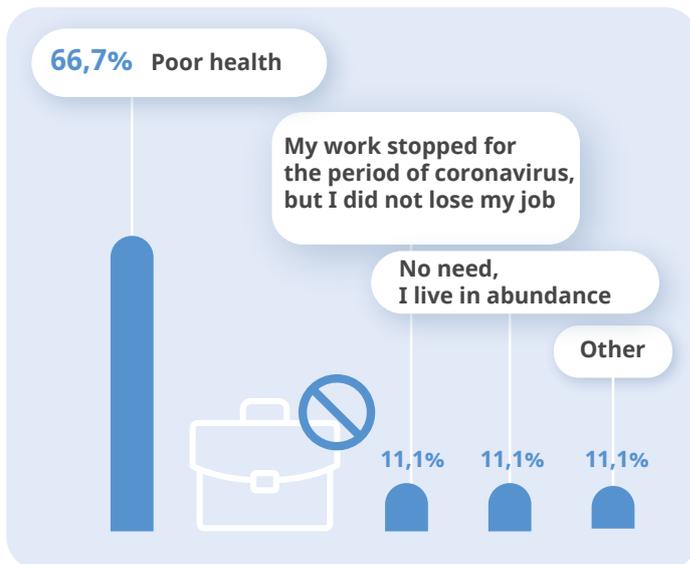


Diagram 76.
Reasons for representatives of vulnerable groups do not work at the moment, in %



SKILL AND TYPES OF SUPPORT

The results of survey clearly show that youth support programs need to include the set of measures focused on sectors with highest level of informal employment affected by COVID-19.

The answers of respondents by gender and age and place of residence show that 40% of urban and rural youths indicated preferential loans, including in agriculture, as the main type of support that will allow them to have more opportunities in the labor market after the pandemic.

For urban girls, retraining or re-qualification programs were of great importance (44.9%), while rural girls needed more business mentoring programs (37.3%).

Both genders of urban and rural population indicate business mentoring programs as necessary and meaningful support - 36% and 44% of the respondents chose this answer accordingly.

Diagram 77. What measures of support will allow you to have more opportunities in the labor market after pandemic, including start of own business? In %

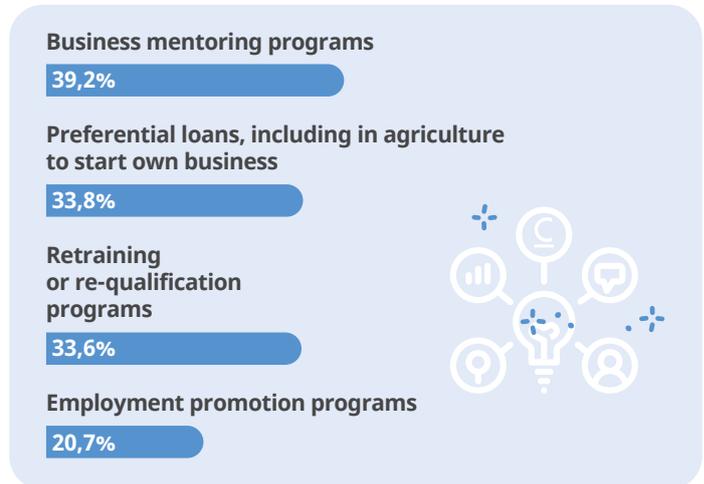
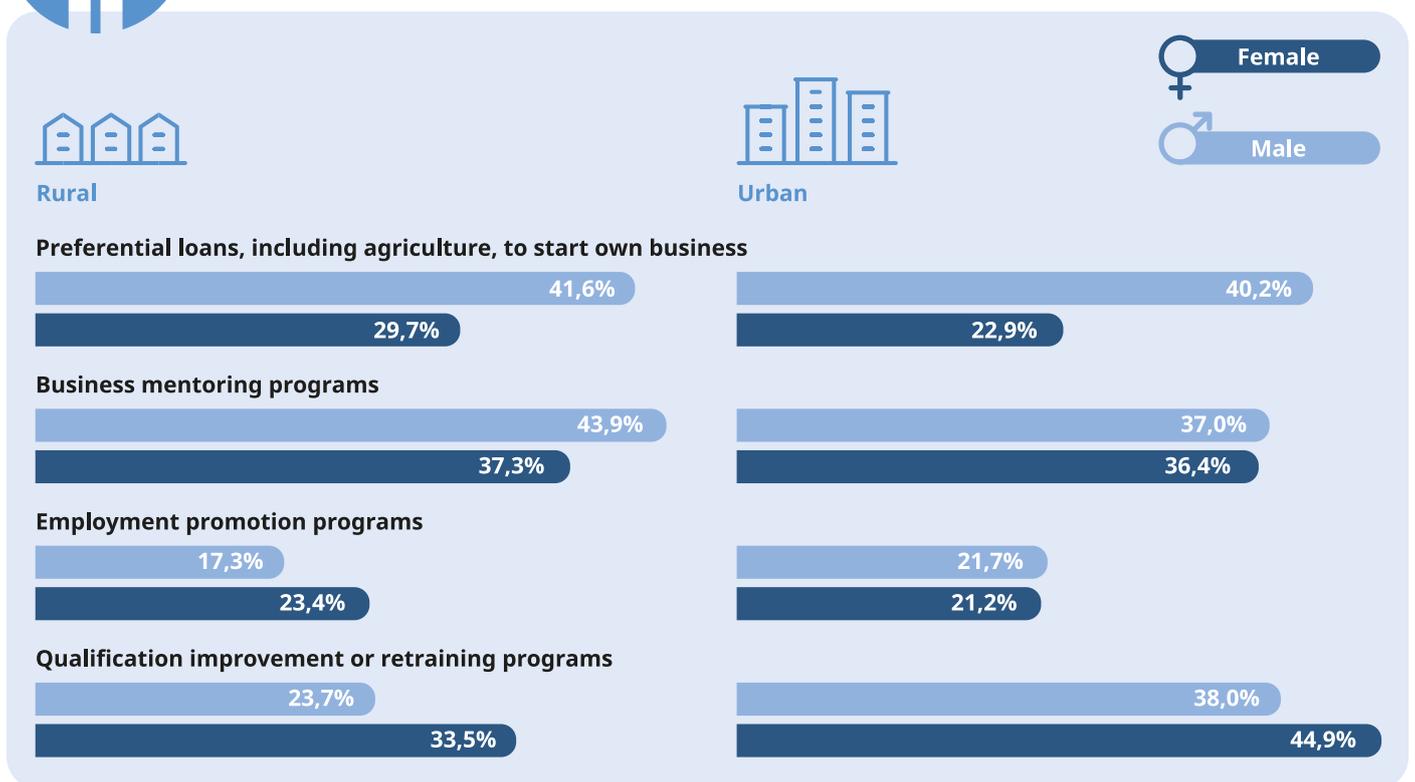


Diagram 78. What measures of support will allow you to have more opportunities in the labor market after the pandemic, including to start own business? By gender, in %



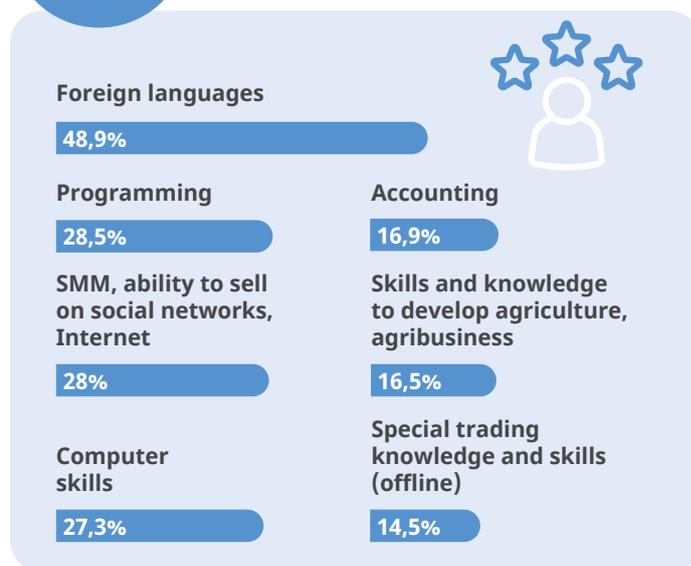
The most in-demand skill that young people want to acquire in order to have more opportunities in the market is knowledge of foreign languages.

Almost half of the respondents chose this option. Then the skills of programming, computer work and SMM (ability to sell on social networks and Internet) were indicated. Each option received from 27 to 29% of the respondents' answers.

Urban and rural girls aged 15-18 are most interested in acquiring computer skills and learning foreign languages (67.3%). Girls aged 19-23 years old want to learn digital marketing (37.7%). Special analysis shows that only urban girls are interested in this skill. Boys aged 19-23 are interested in programming (37.7%), while young men aged 24-29 want to learn more skills for developing agriculture, agribusiness and digital marketing, 30.0% of responses for each option



Diagram 79. What skills do you want to acquire to have more opportunities in the labor market? in %



Vulnerable groups mostly need support to help start own businesses, including soft loans, including in agriculture (35.8%) and business mentoring programs (30.9%).



Diagram 80. What skills do you want to acquire to have more opportunities in the labor market? By gender, by age, in %

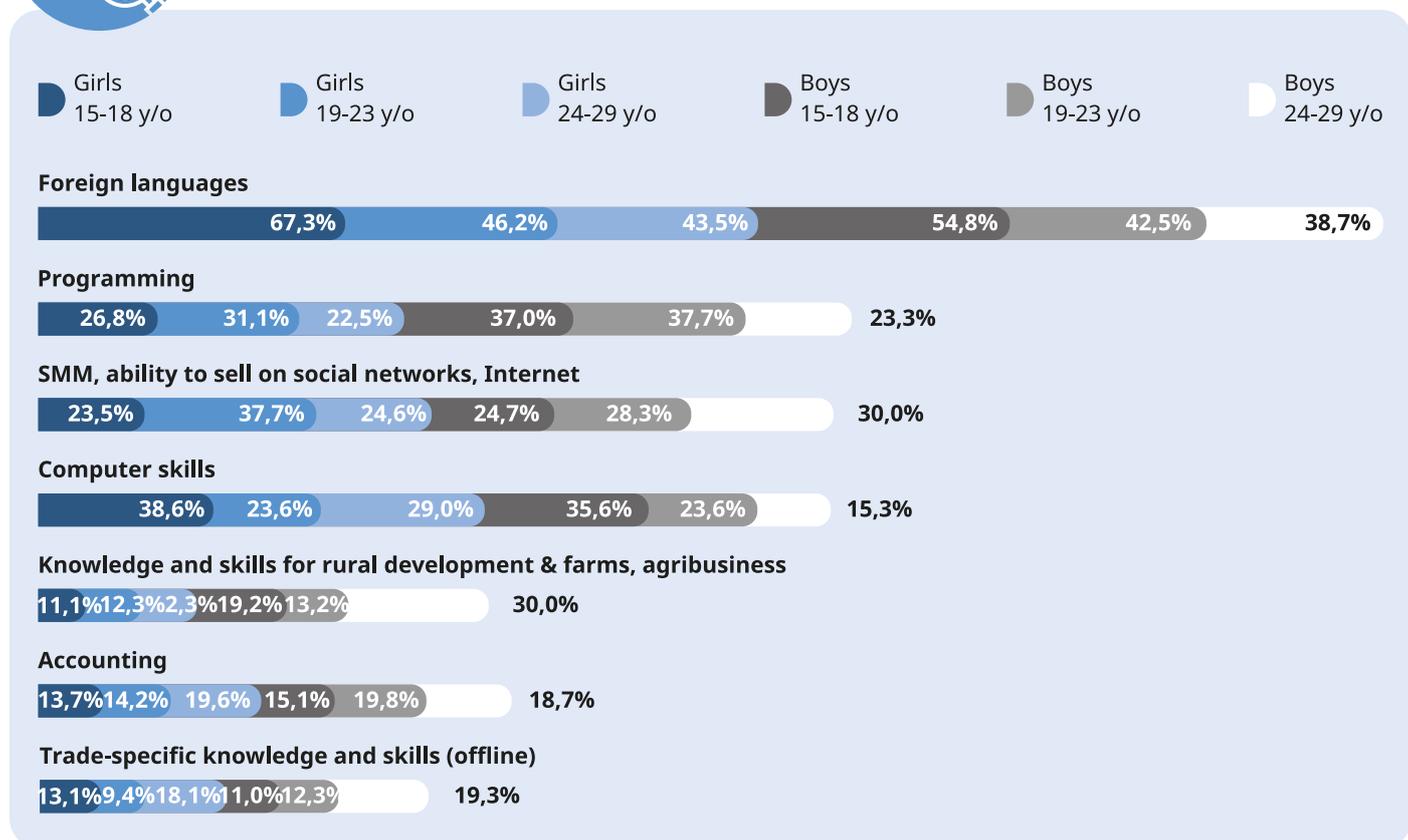


Diagram 81. What support measures will allow you to have more opportunities in the labor market after the pandemic, including to start own business? In % Among vulnerable groups



ACCESS TO HEALTHCARE

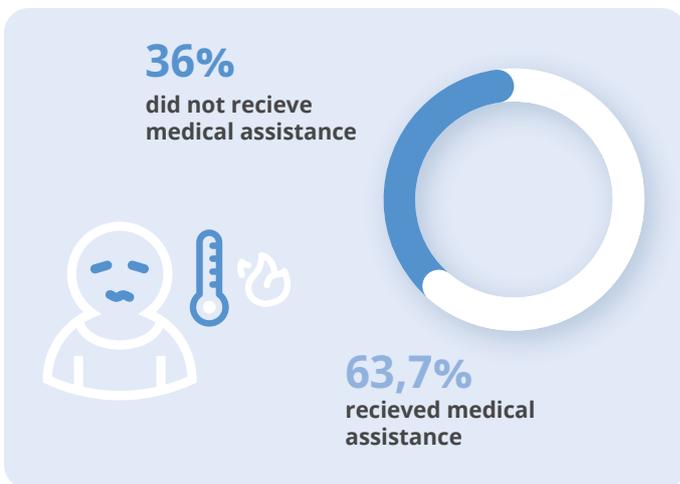
Only 13.4% of respondents needed medical care during the coronavirus outbreak. 63.7% of them sought medical care and received it. 36.3% did not receive medical assistance after they applied.

The question “Have you or your friends experienced difficulties in accessing medical services?”, 38.8% of respondents answered “No, I/ my friends received services easily”.

25.9% were afraid of contracting COVID-19, and respondents also noted difficulties in accessing medical facilities due to lack of transport (25.0%); for 18.1% of the respondents it was physically difficult to access medical facilities.

Both genders experienced the same difficulties, however, girls had more fears of possibility of being infected by COVID-19 (29% of girls versus 20.0% of boys). The rural population had less problems with access to personal protective equipment, and less long queues compared to the urban population. However, the transport issue caused more difficulties in rural areas (28.8% of the rural population versus 20.0% of urban

Diagram 82. If necessary, did you seek medical assistance? In %



population). The urban population’s level of fear to be infected by COVID-19 two times higher than rural population (36.0%).

The most difficult to get access to were the services of dentist (40.0%) and services of general practitioner (28.8%).

Diagram 83. Have you or someone you know experienced difficulties in accessing medical services?



In terms of gender, more girls needed services of the therapist (physician) (37.5% of girls versus 15.6% of boys) and psychologist (12% of girls versus 6.3% of boys). By place of residence - more urban residents needed the services of therapist (35.1% of urban residents versus 23.3% of rural residents).

The main source of information on sexual and reproductive health and rights is the Internet (40.6%). Hotlines are the least popular source of information (3.3%).

Diagram 84. The services of doctors, most difficult to access after the outbreak of the coronavirus, in %

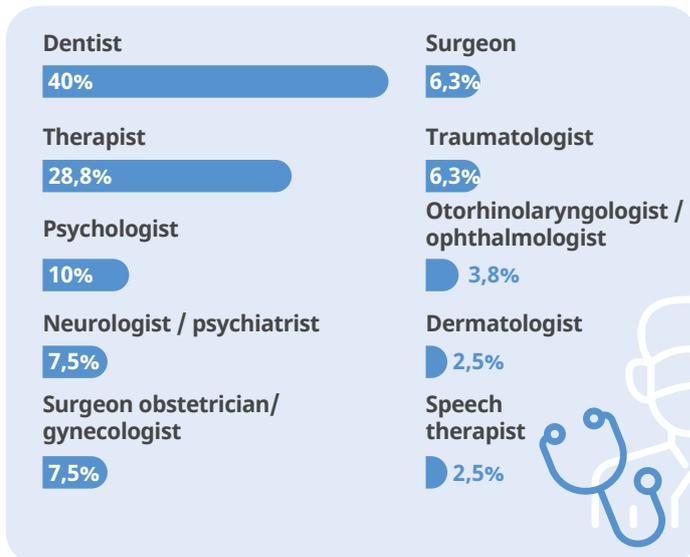
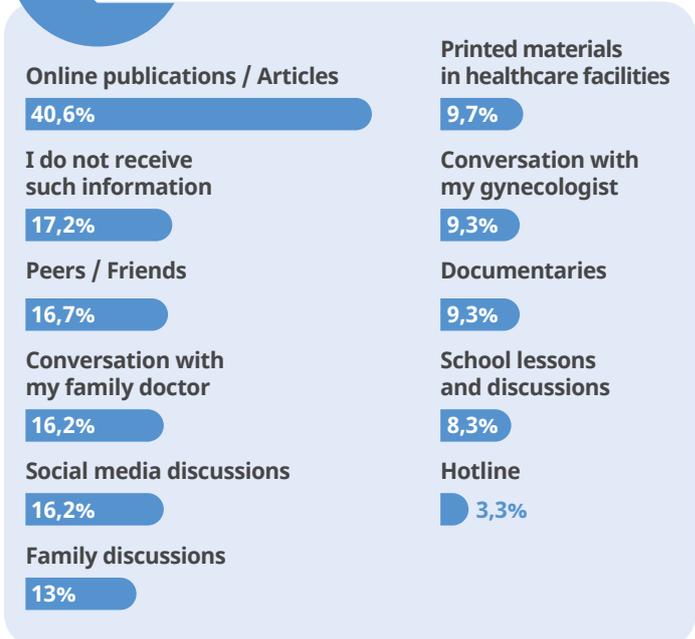


Diagram 85. Sources of information on sexual and reproductive health and rights, in %



Analysis of responses by gender showed that boys are more inclined to receive information from Internet sources (45.1%) and discussions on social networks (18.9%), while girls use large number of information channels and often consult doctors (18, 5% of girls receive information from the family doctor and 13.2% from gynecologist).

Teens aged 15-18 also have more diverse sources of information. In addition to online publications and articles (37.8%), they use four other main channels: conversation with family doctor (17.8%), family discussions (17.8%), school lessons and discussions (17.3%) and peers, friends (17.8%). The higher the age, the more often Internet publications and articles become the main sources, then, respondents note the conversation with family doctor and discussions on social networks among the most priority communication channels.

Urban youth receive more information from Internet (47.0% versus 36.8% of rural youth). For rural youth, the second most important source is conversation with family doctor (19.7%). It should be noted that this topic is more discussed in urban families (16.7% versus 10.7% in rural families). Among vulnerable groups, compared to the main group, twice as many respondents required medical assistance. Of these, 71.7% asked for help and received it, and 28.3% asked but did not receive it.

The difficulties, which vulnerable groups experienced, are somewhat different from those experienced by the main group of respondents.

If in the main group, difficulties were associated with physical access and transport to get to the medical facility, then, in this group it was more scary to get infected with COVID-19 (30.8%) and long queues at medical facilities (23.1%).

This is understandable difference, since some members of vulnerable groups tend to have secondary diseases and pathologies, which can worsen the outcome of coronavirus infection. Also, most likely, some respondents are at risk of discrimination when using access to health services.



Diagram 86. Sources of information on sexual and reproductive health and rights, by gender, in %

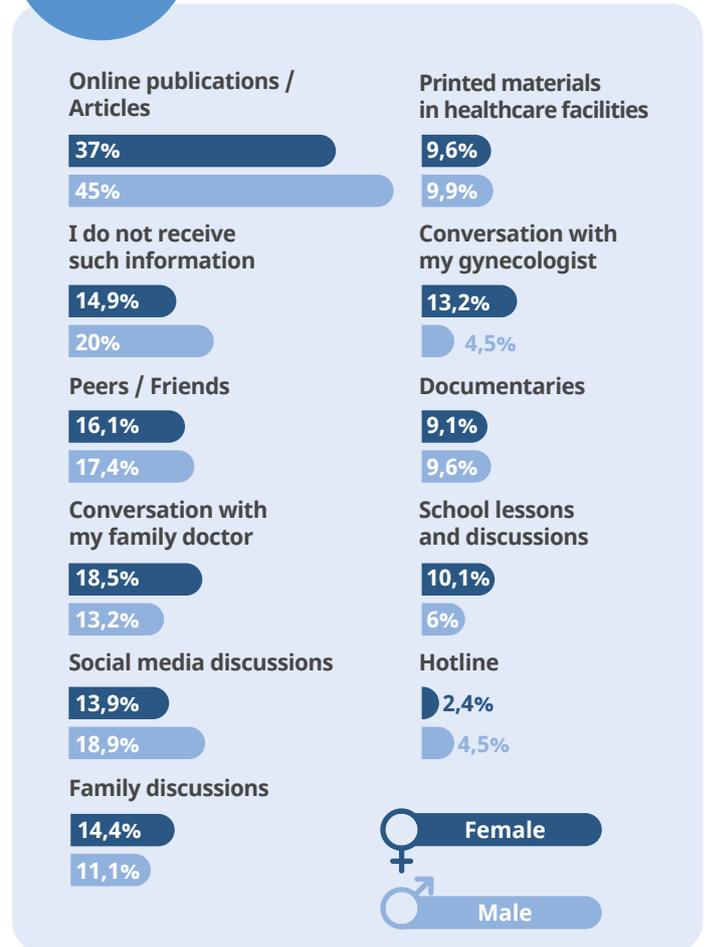


Diagram 87. Distribution of answers of vulnerable group on necessity for medical care, in %

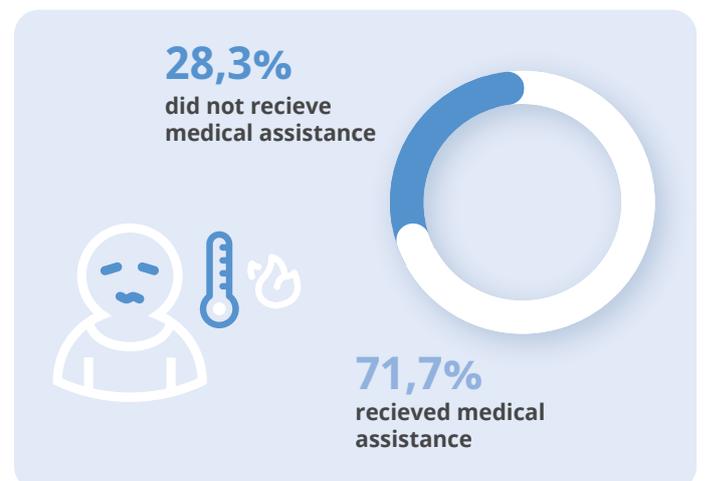


Diagram 88. Distribution of answers of vulnerable groups on access to medical services, in %



If in the main group 40% of respondents needed the services of dentist and 29% - services of therapist, then respondents in vulnerable groups most of all felt the need for services of therapist (47.1%), obstetrician, gynecologist, urologist (29.4%) and dentist (23.5%).

Compared to the main group, this category of citizens uses more different information sources, however, the respondents of this group more often rely on one source, while the main group receives information from more than two sources simultaneously. After Internet articles and publications, the main source is conversation with doctors (gynecologist, family doctor) - more than 30% of respondents chose this answer.

Diagram 89. The services of doctors, most difficult to access for vulnerable groups during the coronavirus outbreak, in %

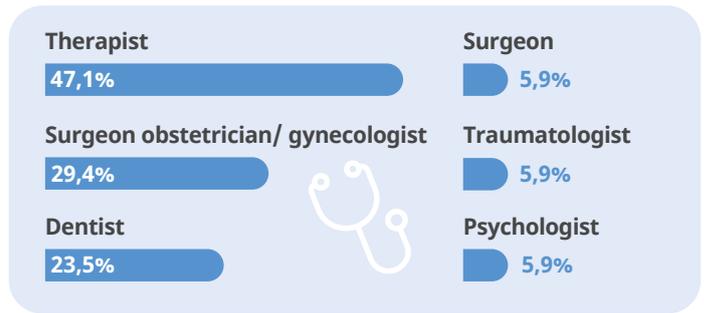
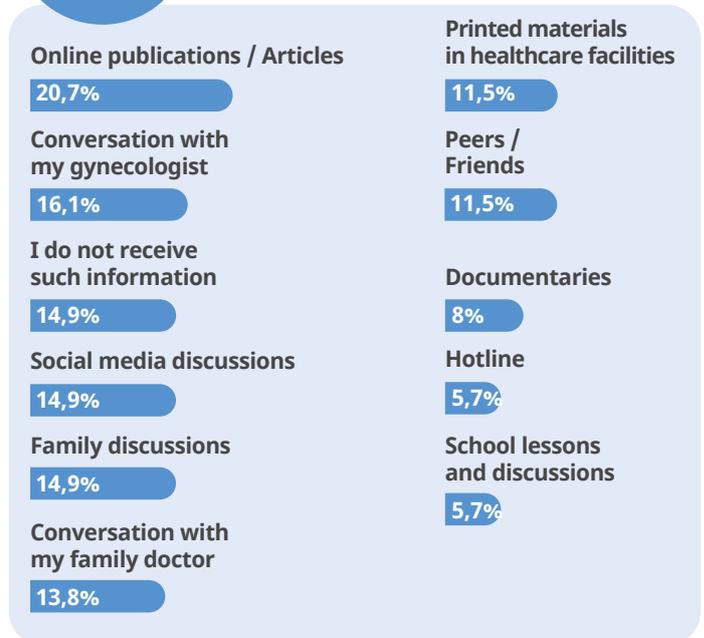


Diagram 90. Sources of information on sexual and reproductive health and rights, in % Among vulnerable groups



CHALLENGES AND AWARENESS OF GETTING HELP

To the question “To what extent did you face challenges during COVID-19?”, slightly more than 90% of young

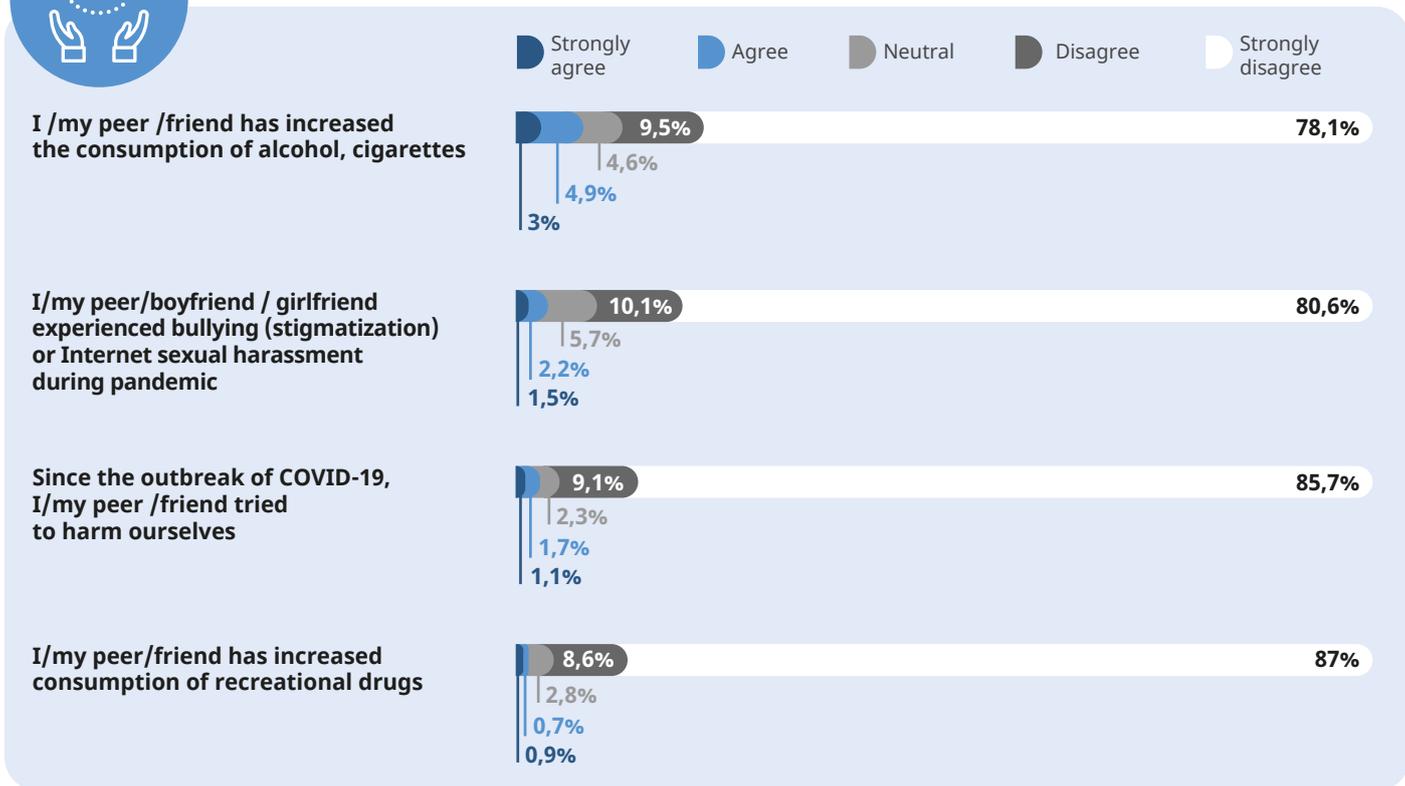
people completely disagreed or agreed with the following statements:

- “I /my peer/ boyfriend/ girlfriend experienced bullying (stigmatization) or sexual harassment on the

- Internet during the pandemic.”
- I / my peer/ friend has increased the use of recreational drugs ”.
- “I / my peer/ friend has increased the consumption of alcohol and cigarettes”
- “Since the outbreak of COVID-19, I/my peer/friend have tried to harm ourselves.”



Diagram 91. Challenges during a pandemic, in %



7.9% of the respondents answered that they completely agree or agree with the statements that he (her) or his (her) peer/friend has increased the consumption of alcohol and cigarettes; 3.7% with the fact that the (she) or his (her) peer / boyfriend / girlfriend experienced bullying (stigmatization) or Internet sexual harassment during the pandemic ”, and 2.8% that since the outbreak of COVID -19 his / her peer / friend tried to harm himself/herself ”.

Among young men aged 24-29, it was noted the highest increase in alcohol and cigarette consumption (16.8% strongly agree and agree).

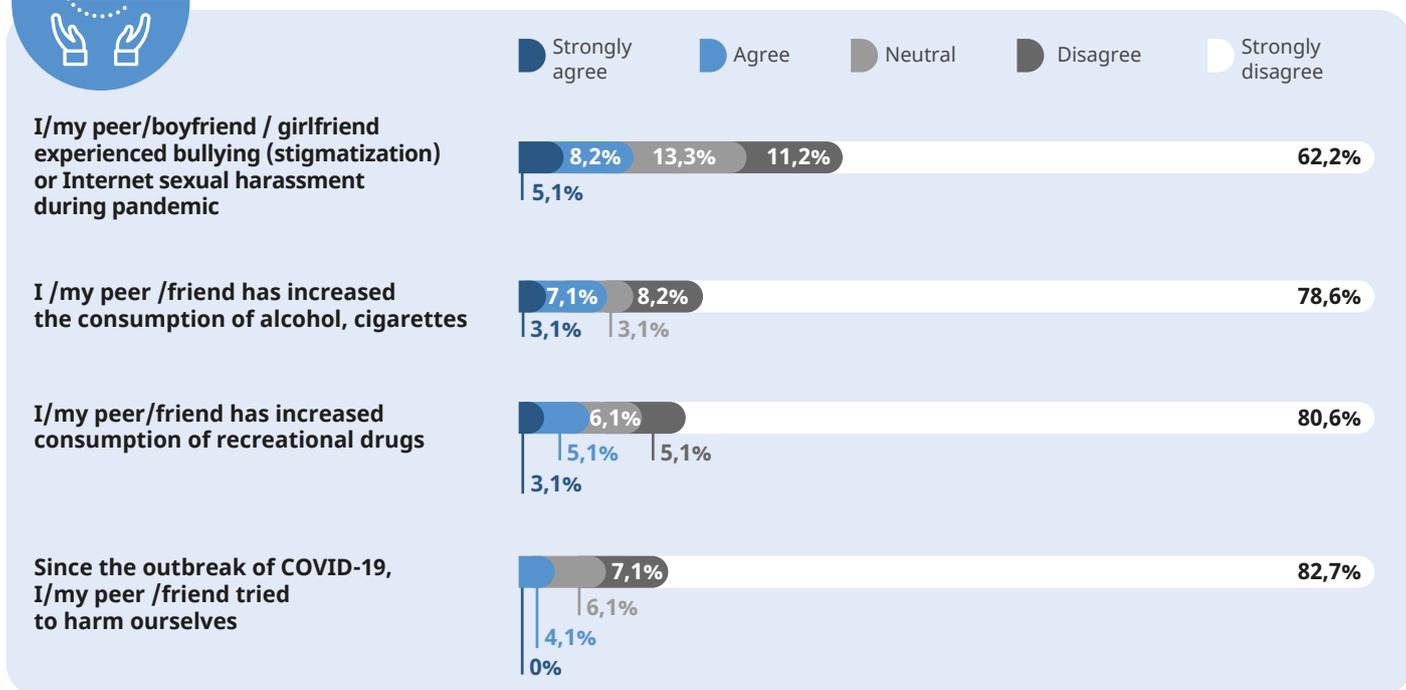
Teenage girls of 15-18 were more susceptible to bullying and sexual harassment on the Internet (5.7%) and most of all tried to harm themselves during the pandemic - 5.2%.

Compared to the main group, the percentage of those who have experienced various challenges among vulnerable groups, is much higher:

13.3% were bullied or sexually harassed on the Internet during the pandemic; 8.2% - increased the consumption of recreational drugs; 10.2% - increased consumption of alcohol and cigarettes; 4.1% - tried to harm themselves.



Diagram 92. Challenges during pandemic, in %



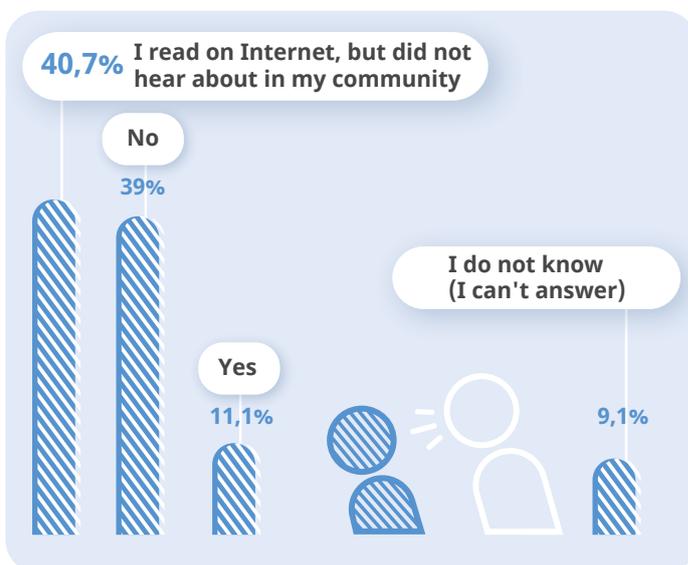
DOMESTIC VIOLENCE

To the question “Have you heard about cases of domestic violence during quarantine in your community?”,

11.1% answered “yes”, 40.7% read on Internet, but did not hear about in their community, 39.0% - no, and 9.1% - I don't know (I can't answer).

34.6% answered that they did not know whether their peers asked for help in case of domestic violence or could not answer this question, 30.2% answered “No”. 20.9% of the respondents believe that no one reports cases of violence, and only 13.1% are aware of cases.

Diagram 93. Distribution of responses about domestic violence, in %



Young people in the older age group believe that the majority apply to in case of violence (16.9% of young people aged 24-29 answered positively, against 6.9% of young people aged 15-18). In general, a high percentage of negative answers indicates that there is need and importance of intervention in this issue.

The survey showed that 52.7% of the respondents know where to apply if they themselves or someone else is subjected to domestic violence. Young people aged 24-29 years, slightly more than young people aged 15-18 years, know exactly where to go (73.6% versus 63.6%). Girls are less aware of hotline numbers (65.9% of girls versus 69.5% of boys).

67.6% of respondents said they know hotline numbers in case of domestic violence, 31.2 % do not know.

288 responses were received to the open-ended question "What hotlines do you know?". Most famous hotlines are the police (34.1%), ambulance (15.2%), and the COVID-19 hotline (14.0%). In addition to those listed in the table, young people mentioned the numbers of crisis centers and schools.

54.4% answered positively to the question whether they would have asked for help in the event of domestic violence, 25.4% would prefer not to apply and 20.2% do not know what to do in this case.

Diagram 96. What hotlines do you know?

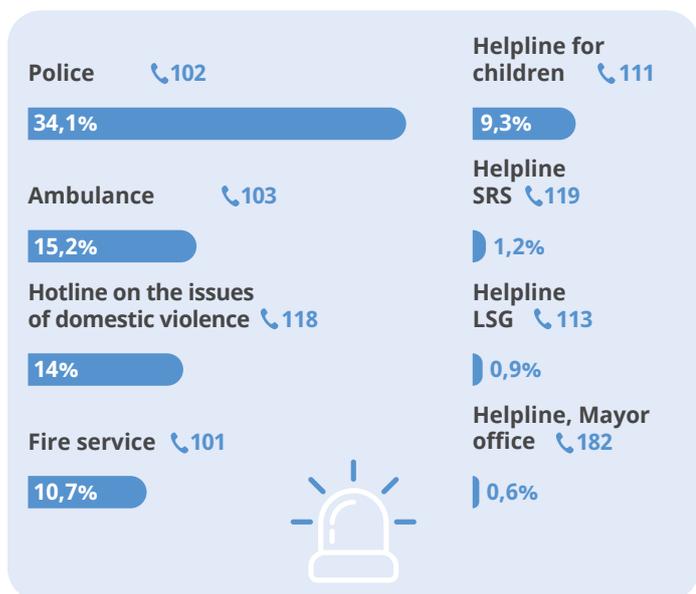
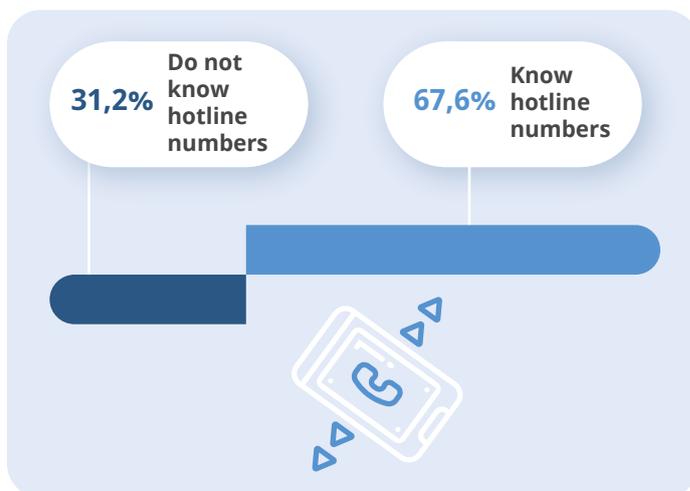


Diagram 94. Do you know where to go for help and support if you or someone else is subject to domestic violence?



Diagram 95. Do you know the hotline numbers in case you or someone is subject to domestic violence?



In terms of gender, age and place of residence, we can see that rural girls are more likely to seek help, while urban boys are least likely to go anywhere in case of violence (28.0% of urban young men aged 24-29 versus 52.6% of urban youths aged 15-18). Rural girls aged 19-23 (66.2%), and urban girls aged 24-29 (67.2%) are more willing to seek help. The study showed that 70.1% of citizens would apply to police or prosecutor's office in case of violence, and only 9.6% - to crisis centers.

Diagram 97.
Would you seek help if you suffered from domestic violence?

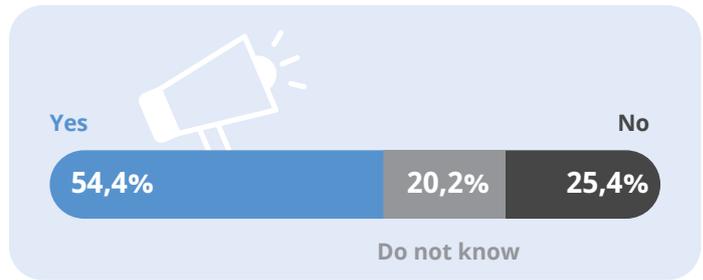
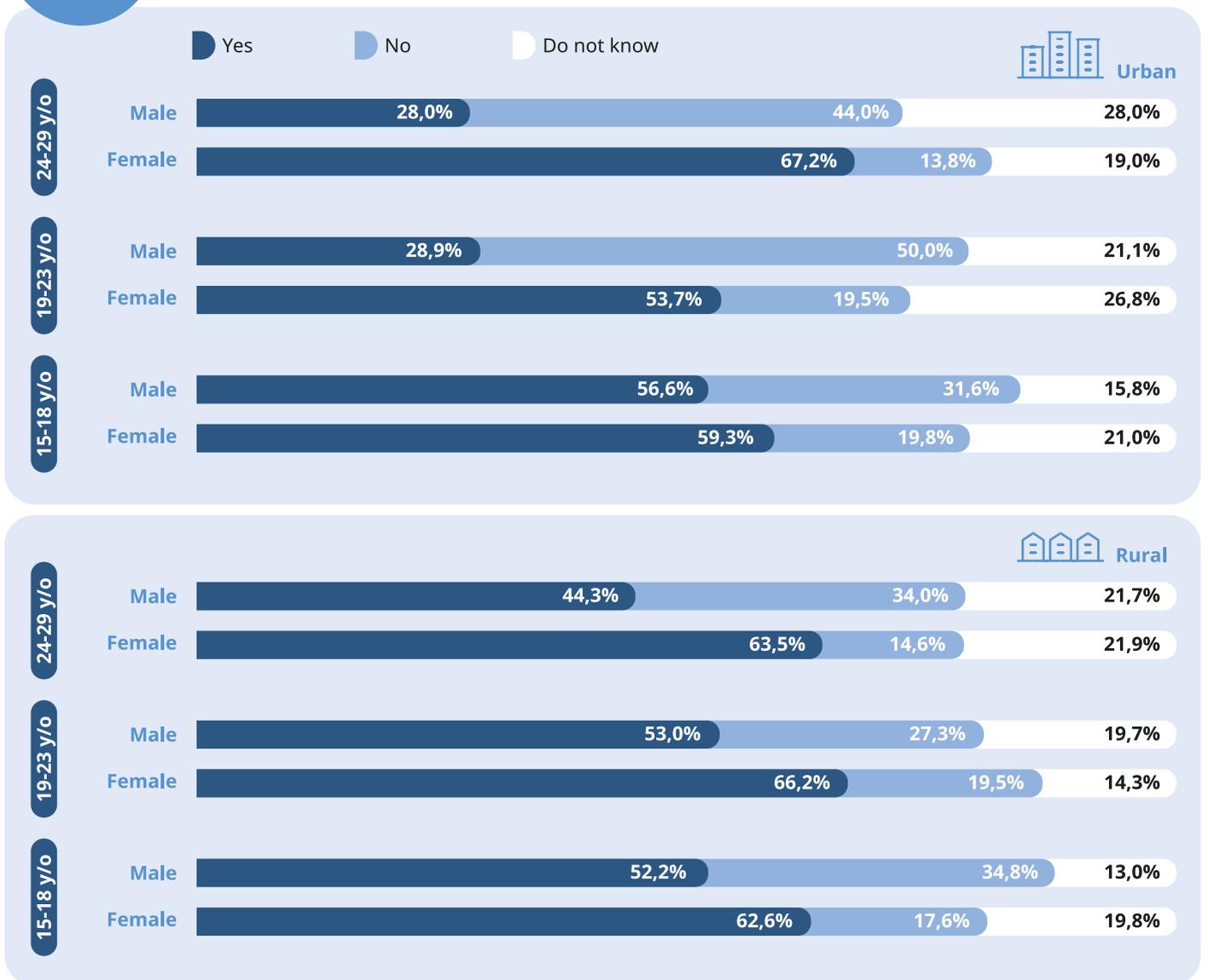


Diagram 98.
Distribution of answers by addressability, by gender, in %



Girls and boys would equally apply to police, but girls trust crisis centers more (11.4% versus 6.4% of boys). Only boys would go to Aksakal Courts, while girls indicated women’s councils as preference. In another answer, the respondents added that they would go to psychologist or relatives. Some of the respondents did not know where to go

Data on vulnerable groups show that, compared to the main group, more people have heard about cases of domestic violence during quarantine in their community (18.2%); 12.2% of the respondents found it difficult to answer.

As in the main group, the majority thinks that peers who have experienced domestic violence do not seek help (14.6%) or that only few (37.5%) seek help. Exactly half of the respondents know where to go if they or someone else has been subjected to domestic violence, although this figure is slightly lower than that of the main group.

Only 10.2% of respondents would seek help if they had suffered from domestic violence this is two and half times less than in the main group.

The knowledge of hotline numbers is higher than that of the main group, 80.4% of respondents know where to call. Hotlines named by respondents: 102 (police), 111 (children’s helpline) and crisis centers. The trust of the vulnerable group to police is significantly low - 52.3% versus 70.1% in the main group. This fact is made up for by trust in crisis centers - 22.7%.



Diagram 99. Where would you go if you suffered from domestic violence?

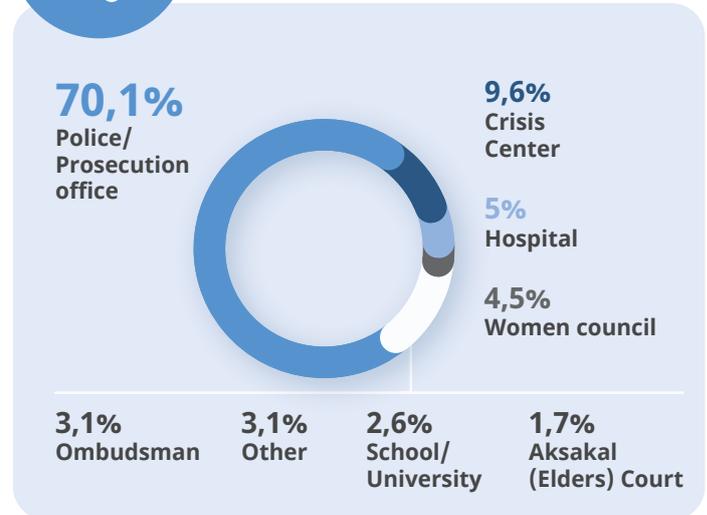
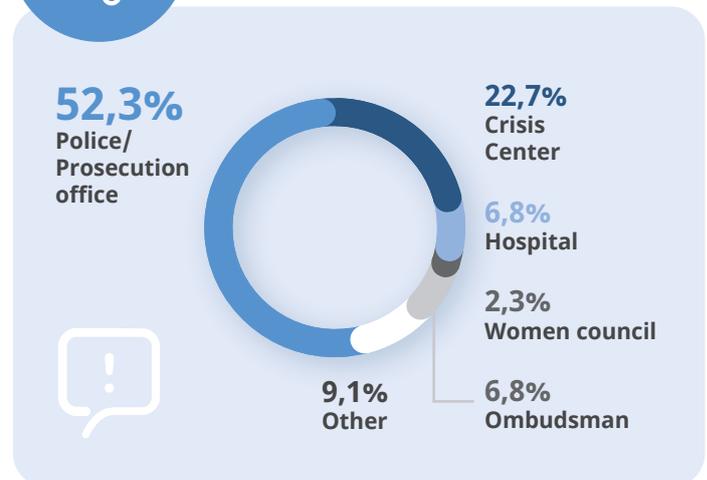
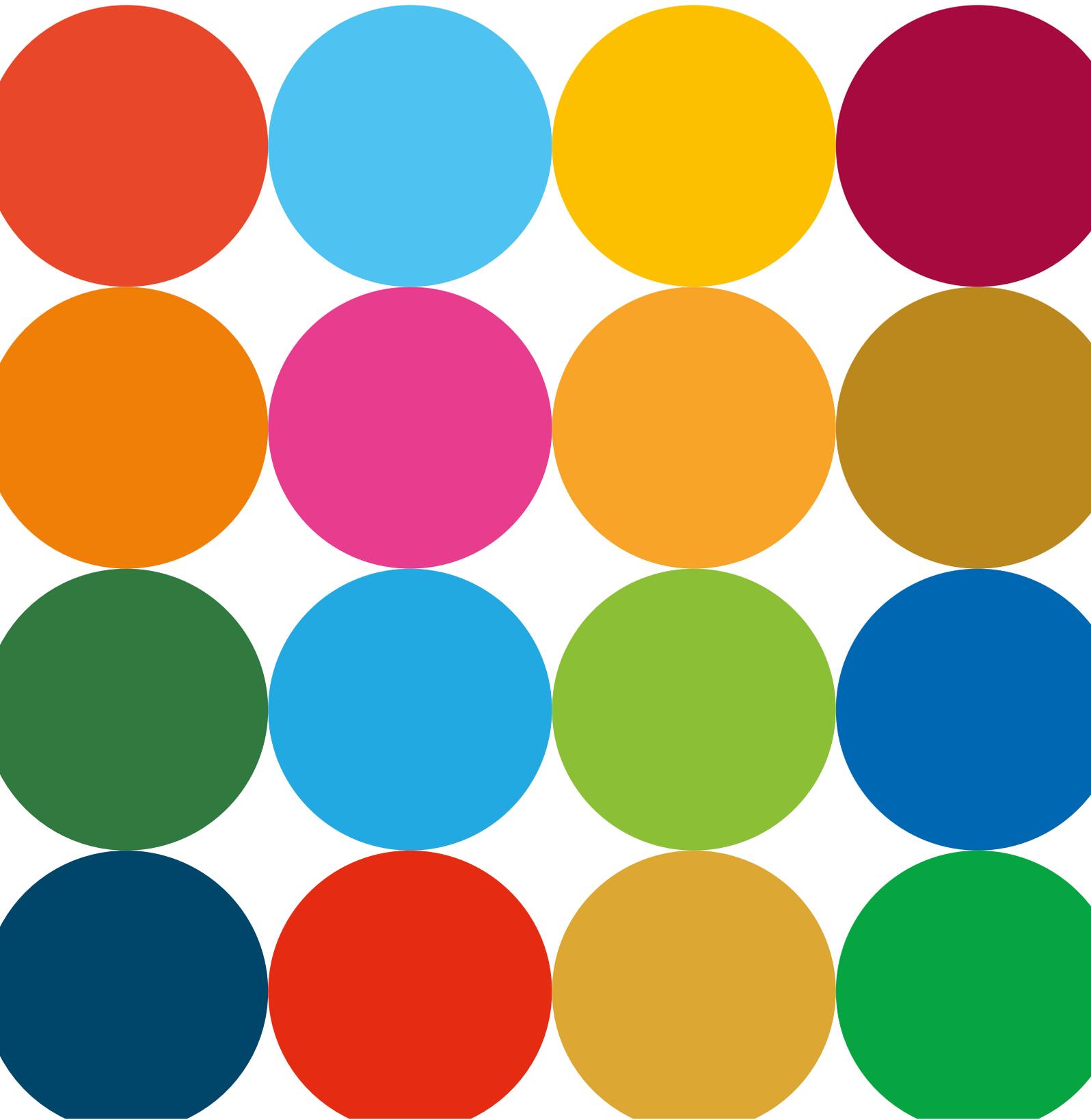


Diagram 100. Distribution of responses on possible appeal in case of domestic violence among vulnerable groups, in %



DESCRIPTION OF COLLECTED DATA. CIVIC ENGAGEMENT



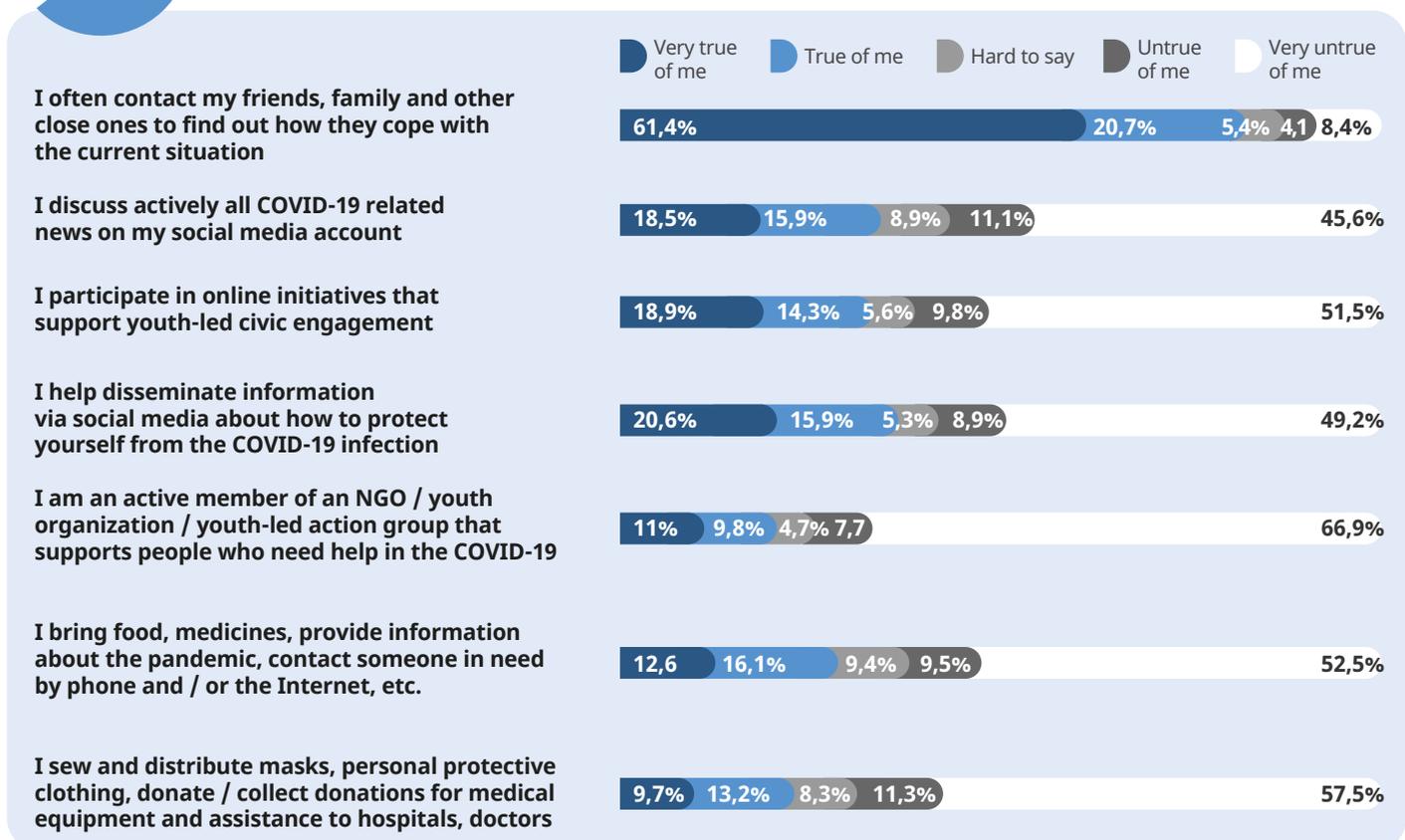
In general, youth civic engagement is rather low. The activity of young people is limited to communication with friends, family and other close circles to find out how they cope with the current situation (61.4%)

Next are different types of online activism, such as active discussion of COVID-19-related news on our homepage, engagement in online initiatives that support youth civic engagement, and participation in the dissemination of information on how to protect ourselves from COVID-19, through social networks. The level of activity in initiatives that require constant commitment of time, such as membership in an NGO/youth

organization/youth initiative group or physical presence (especially related to Covid-19), including the delivery of food and medicine, provision of information about the pandemic, communication with those in need over the phone and/or the Internet, or sewing and distributing masks, suits, donations for medical equipment, and assistance to hospitals and doctors was low. Only 10-12% of young people took part in such events.



Diagram 101.
Civic engagement of youth, in %



The young men showed significantly more activity in cases where physical presence was required. 25.0% of young men took part in civic activity in sewing and distributing masks, suits, collecting donations for medical equipment and aid to hospitals, doctors, while the percentage of girls who answered that these actions were not typical for them was 60.2% versus 54,2% of boys.

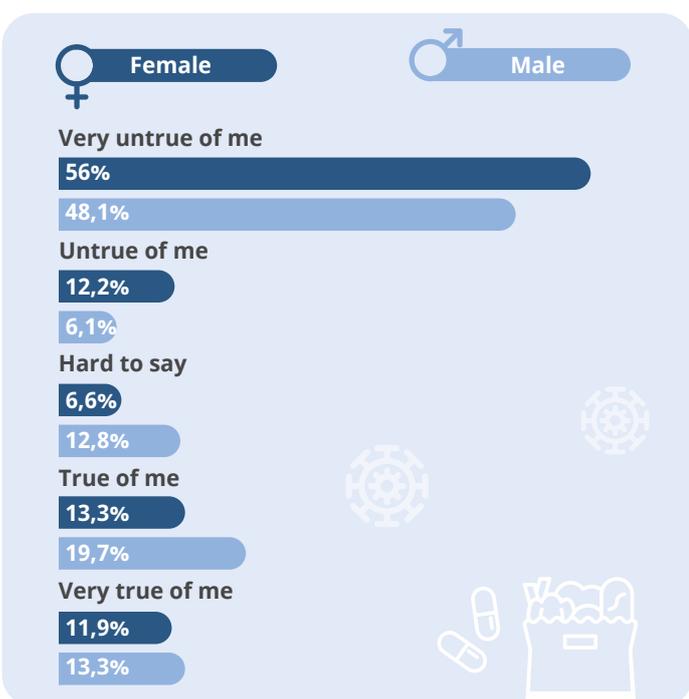
The boys also showed somewhat more activity in the delivery of food and medicine, providing information about the pandemic, keeping in touch with those in need by phone and / or via the Internet - 33.0% of boys were involved versus 25.2% of girls.

Girls devoted themselves more to their families and beloved ones, learning how they cope with this situation (84.3% of girls versus 79.4% of boys)

In terms of age, young people in the age of 15-18 are more involved in various types of civic activities,

while the other two age categories are mainly limited to devotion to family and beloved ones. Girls aged 15-18 are more involved in the activities

Diagram 103. I bring food, medicines, provide information about the pandemic, contact someone in need by phone and / or the Internet, etc., gender, gender, in %



of NGOs and youth organizations (17.8%), while boys aged 19-24 are more active in other types of activities (13.9%)..

Diagram 102. I sew and distribute masks, personal protective clothing, donate / collect donations for medical equipment and assistance to hospitals, doctors, by gender, in %

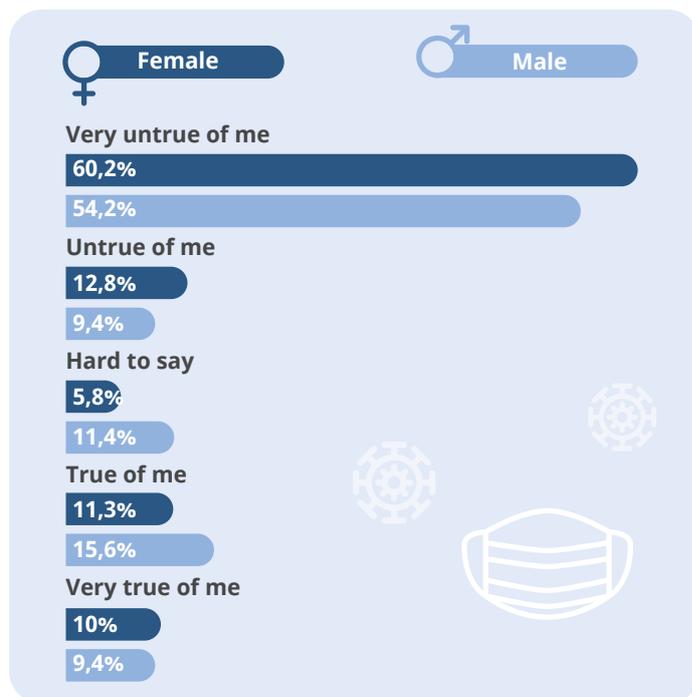


Diagram 104. I often contact my friends, family and other close ones to find out how they cope with the current situation, by gender, in %

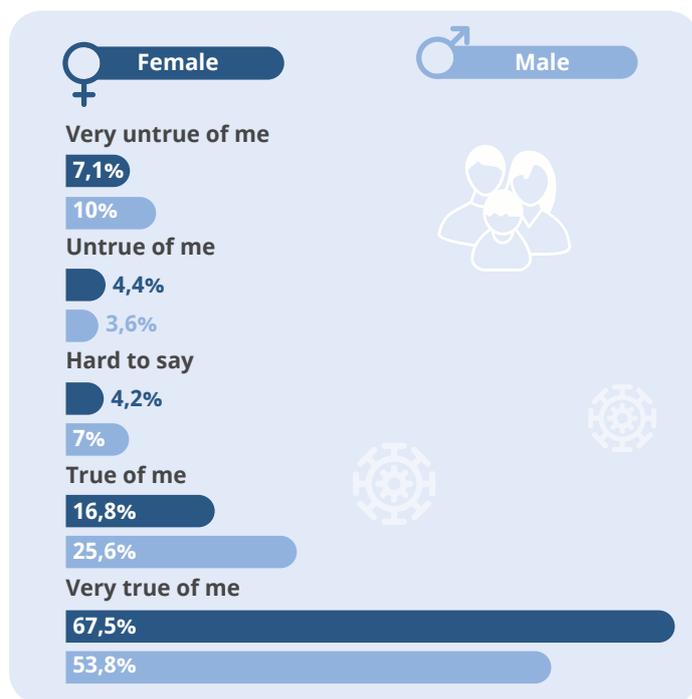
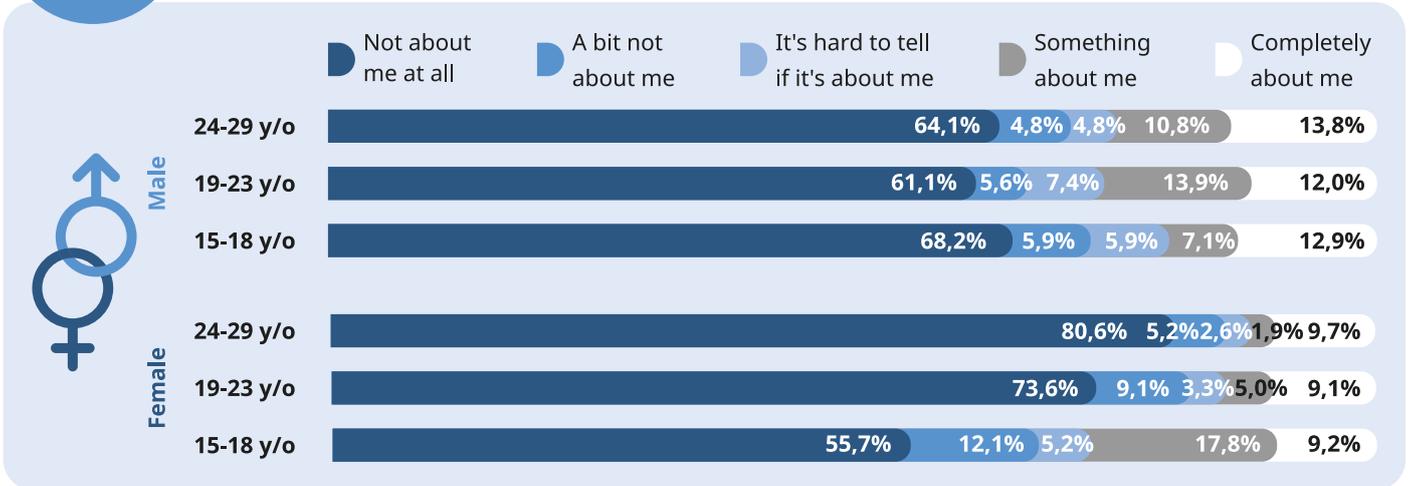




Diagram 105.
I am an active member of an NGO/youth organization/youth initiative group that supports people who need help in time for COVID - 19, by gender, by age, in %



According to the research results, rural youth showed a more active citizenship, especially in relief initiatives (sewing masks, collecting donations, delivering food and medicine, membership in NGOs and youth organizations, active discussion of the coronavirus topic in social networks) - 5-7% more than urban youth.

The table shows that 64.3% of the respondents have never volunteered. The majority of young people who volunteered before the pandemic either stopped this activity at all (11.2%), or began to volunteer less (9.1%) since the outbreak of the coronavirus. In terms of gender, the percentage of girls who previously volunteered but stopped since the outbreak of COVID-19 is significantly higher (13.6% of girls versus 8.2% of boys).

In terms of civic engagement, vulnerable groups are much more active than the main one in many activities; on average, half of the respondents were involved in some form of civic engagement. In addition to communication with relatives and online activism, which are represented on an equal basis with the main group, a larger percentage of representatives of vulnerable groups are members of NGOs, youth organizations and were more active in events that required physical presence (I deliver food, medicines, provide information about the pandemic, contact with a needy via phone and / or Internet, etc. and sew and distribute masks, personal protective clothing, make donations / collect donations for medical equipment and assistance to hospitals, doctors)



Diagram 106.
Has the amount of time you devote to volunteering changed since the outbreak of COVID-19?

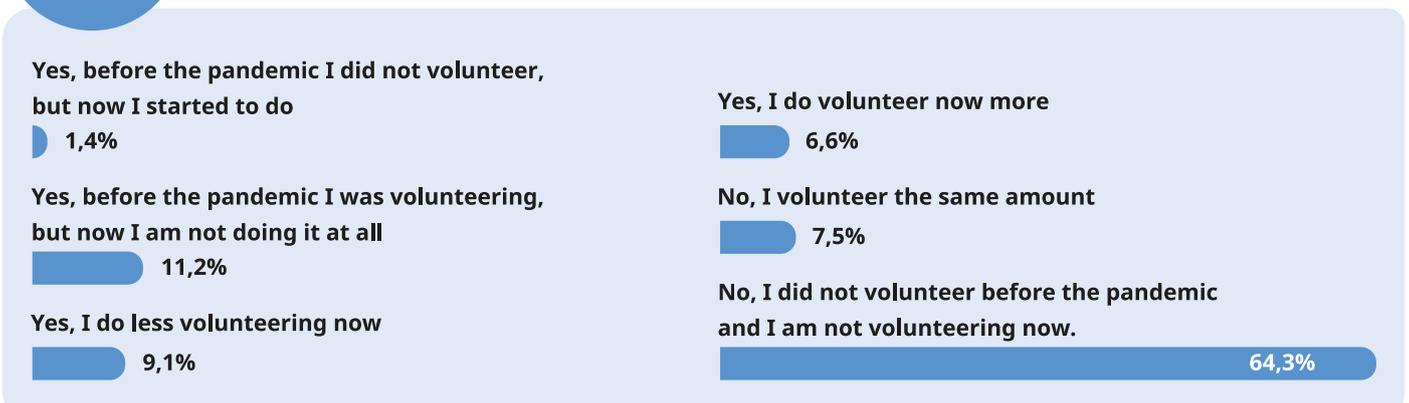




Diagram 107.
Has the amount of time you devote to volunteering changed since the outbreak of Covid-19? The number, by gender, in %

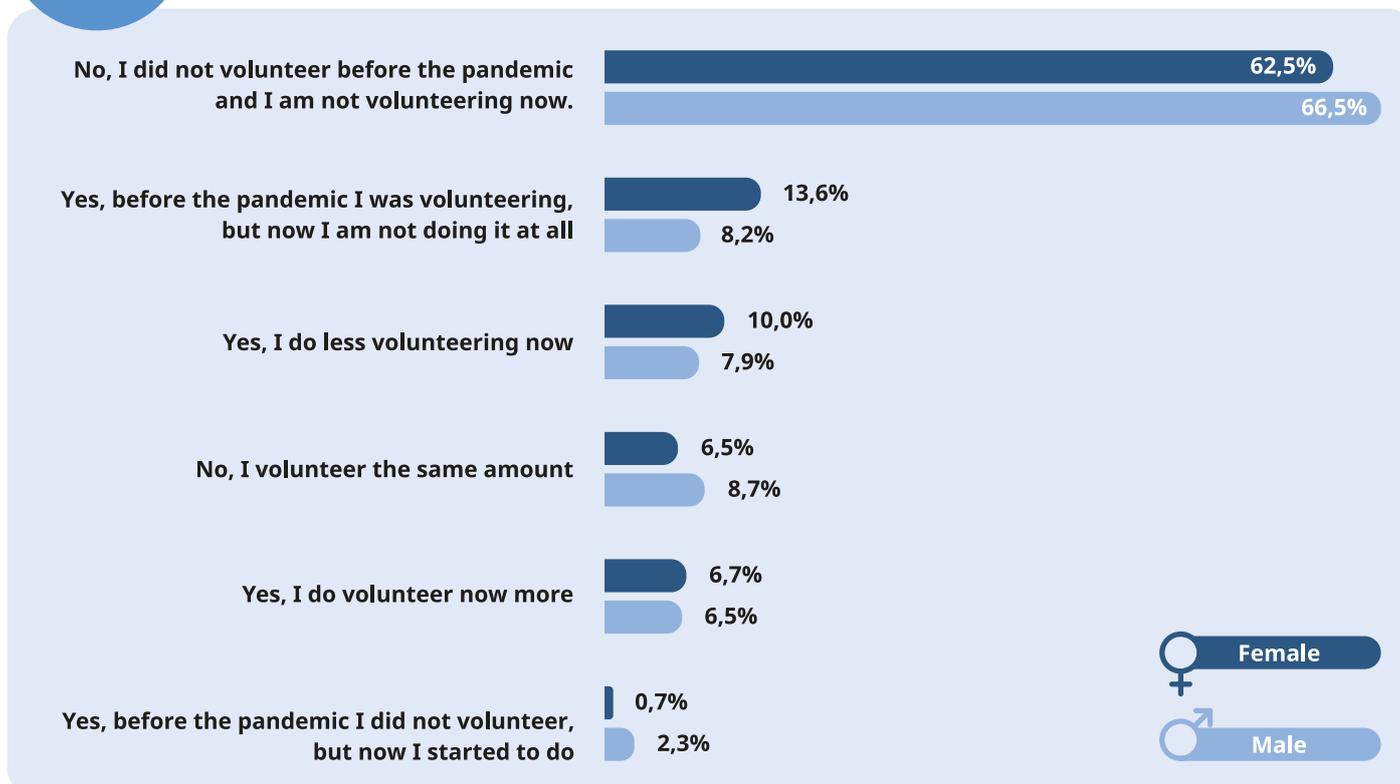
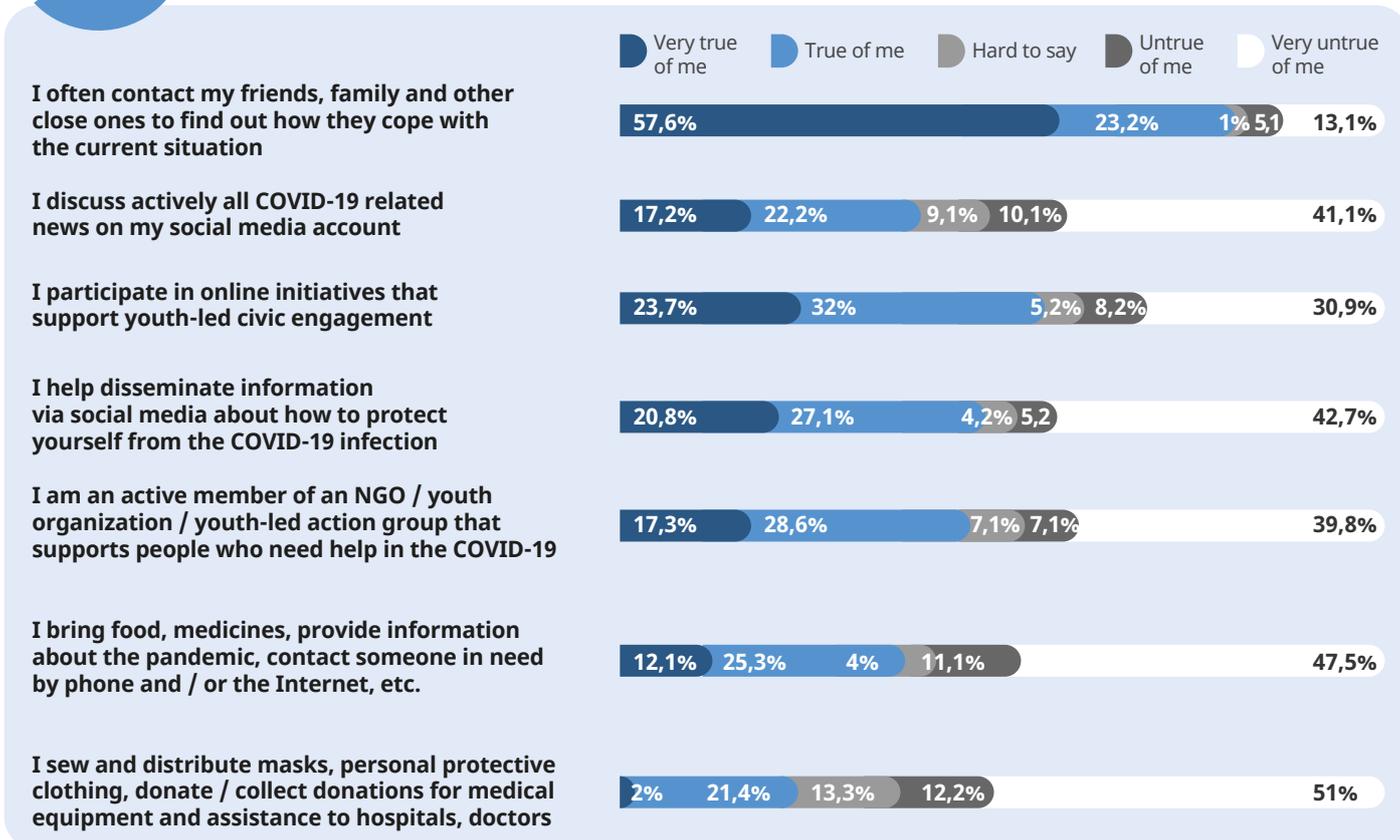
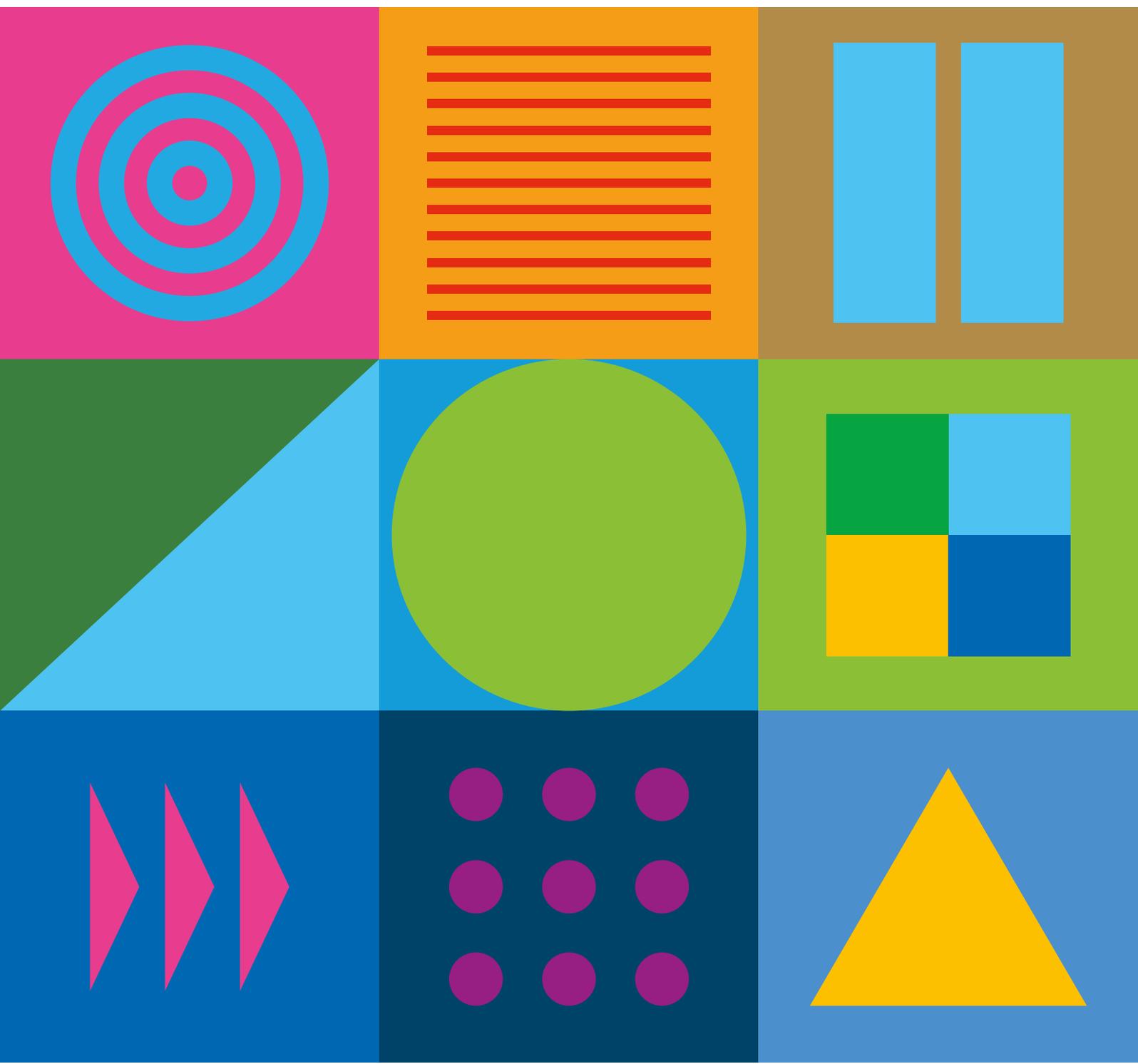


Diagram 108.
Civic engagement of vulnerable youth, in %



DESCRIPTION OF COLLECTED DATA. DESIRES, EXPECTED AID



The majority of respondents believe that providing reliable information is an important measure to support others during COVID-19, including providing information on how each of us can contribute to limiting the spread of COVID-19 (62.3%),

providing reliable information in a creative way to friends (43.8%), together with leaders and doctors on public channels, news programs, etc. (38.4%). The next urgent action is considered by young people to stop violence and stigmatization of

victims of violence (46.3%). A small percentage of young people believe that they do not have a role in the fight against the virus (5.7%), and 17-20% of respondents consider this to be the responsibility of the state or doctors.

From the gender perspective, there are more girls than young men who would want to stop violence and end stigmatization of victims (49.8 percent and 41.9 percent respectively). Young people aged 15-18 years are more than others are ready to spread reliable information in creative ways (51.2%).



Diagram 109.
If you had capacity and optimal resources, what would you want to do to support yourself and others during the COVID-19 pandemic? (Number of respondents, %)



Answering the question “What support do you and your communities need to better cope with the COVID-19 pandemic”, 53-61 percent of respondents chose four key types of support they need the most: accessible and reliable information through public channels; more funds for COVID-19 testing; food, water, medicines, essential supplies and electricity; and effective management of (work with) infected people. Thirty six point two (36.2) percent of respondents needed online learning, while the share of respondents needing offline learning was much lower (21.9%). Only a small number of respondents said they needed online entertainments, information about how to protect yourself from domestic violence, and

psychological consultation, from 9 to 11 percent.

There are more girls than young men who need psychological support, offline learning opportunities and information about how to protect yourself from domestic violence (by 5-9%). There are two times more girls and young women aged 15-19 and 24-29 years than young men who need psychological help.

Rural youth aged 15-19 years need online and offline learning opportunities more than their peers from urban areas, by 15.1 and 5.7 percent respectively.



Diagram 110.
What support do you and your communities need to better cope with the COVID-19 pandemic? (number of respondents, %)

I need better social protection (allowances, housing and public utilities benefits, tax benefits, employment information, soft loans)



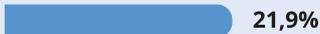
I need information on how to protect myself from domestic violence



I need self-learning opportunities



I need opportunities to continue learning offline



I need online learning opportunities



I need online entertainments



I need a consultation (psychological)



Effective management of infected people



Food, water, medicines, essential supplies, electricity



More funds for COVID-19 testing



Accessible and reliable information through public channels



Diagram 111.
Online and offline learning needs (age, living area, %)

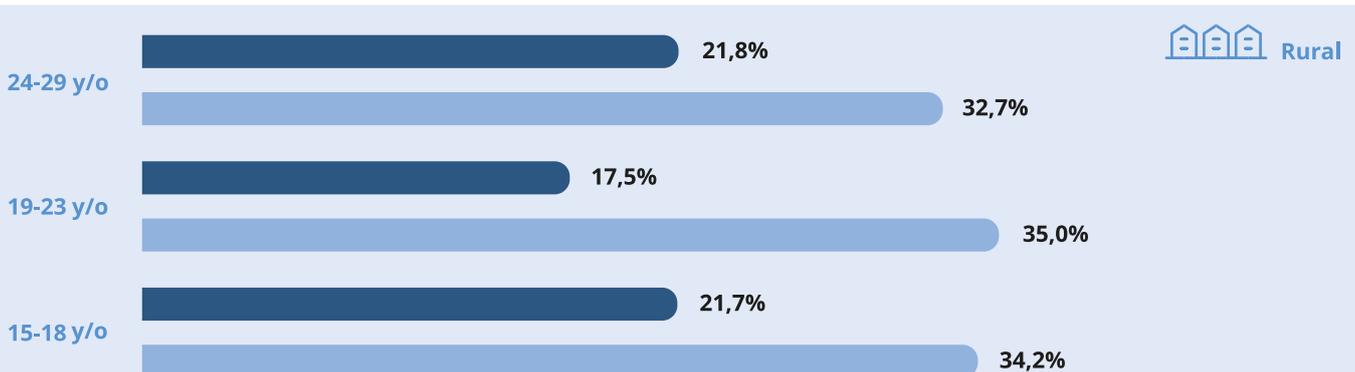




Diagram 112.
What online learning format would be effective for you? (%)

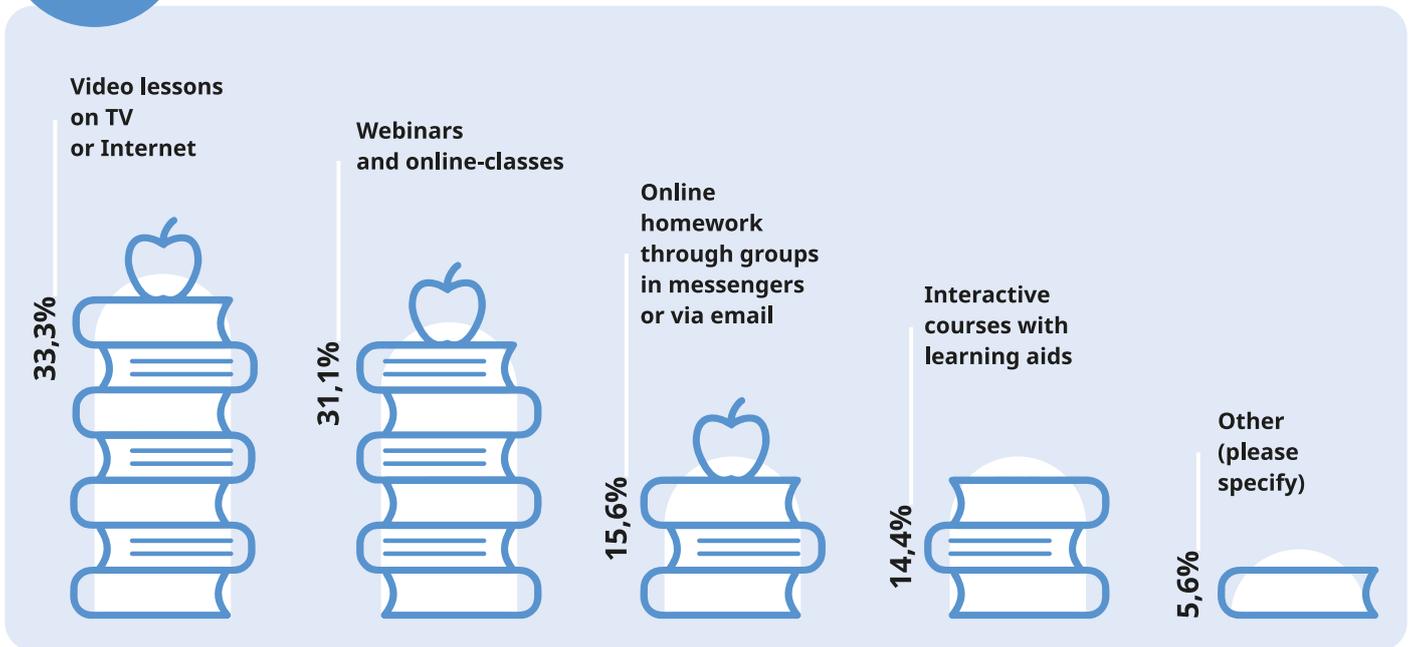
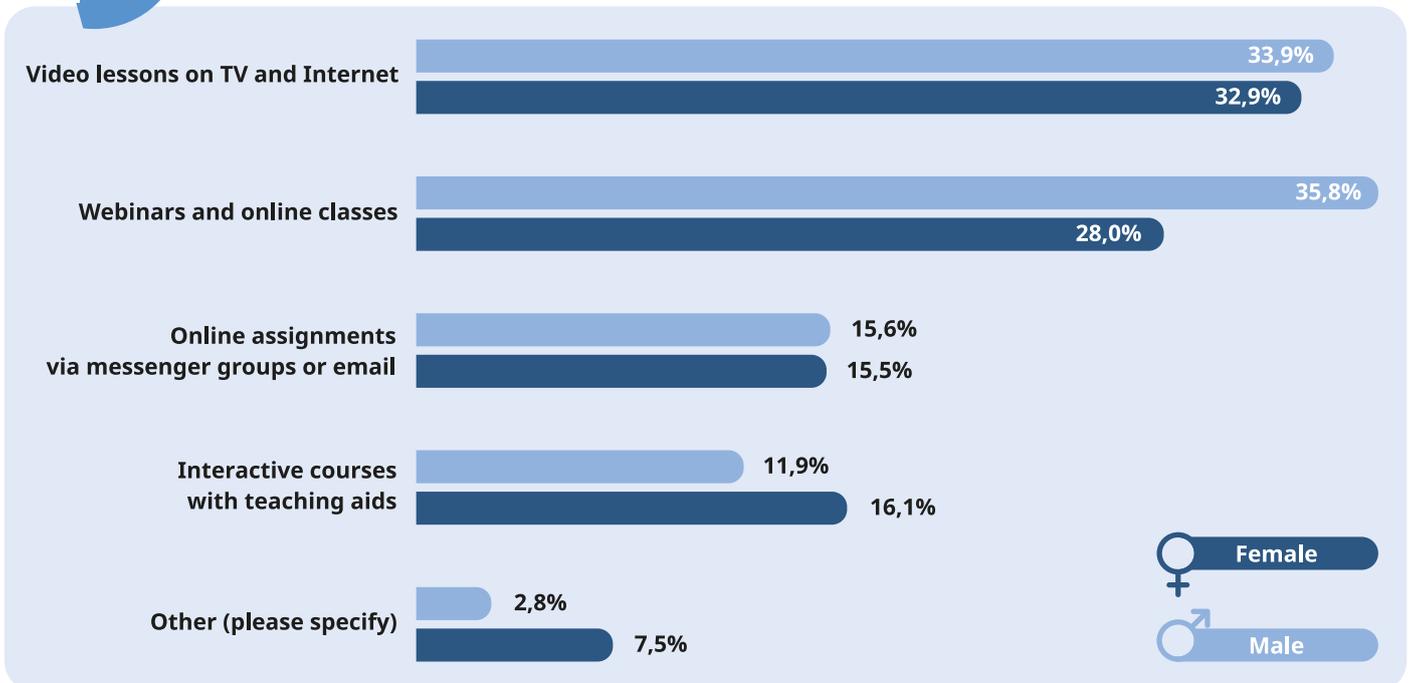


Diagram 113.
What online learning format would be effective for you? (by gender, %)



There was no significant difference between rural and urban respondents' answers to the question about online learning formats. However, while rural students think the best options are video

lessons on TV or Internet, webinars and online classes, urban youth also chooses interactive courses with learning aids in addition to the above two options.



Diagram 114.
What online learning format would be effective for you? (area of living, %)

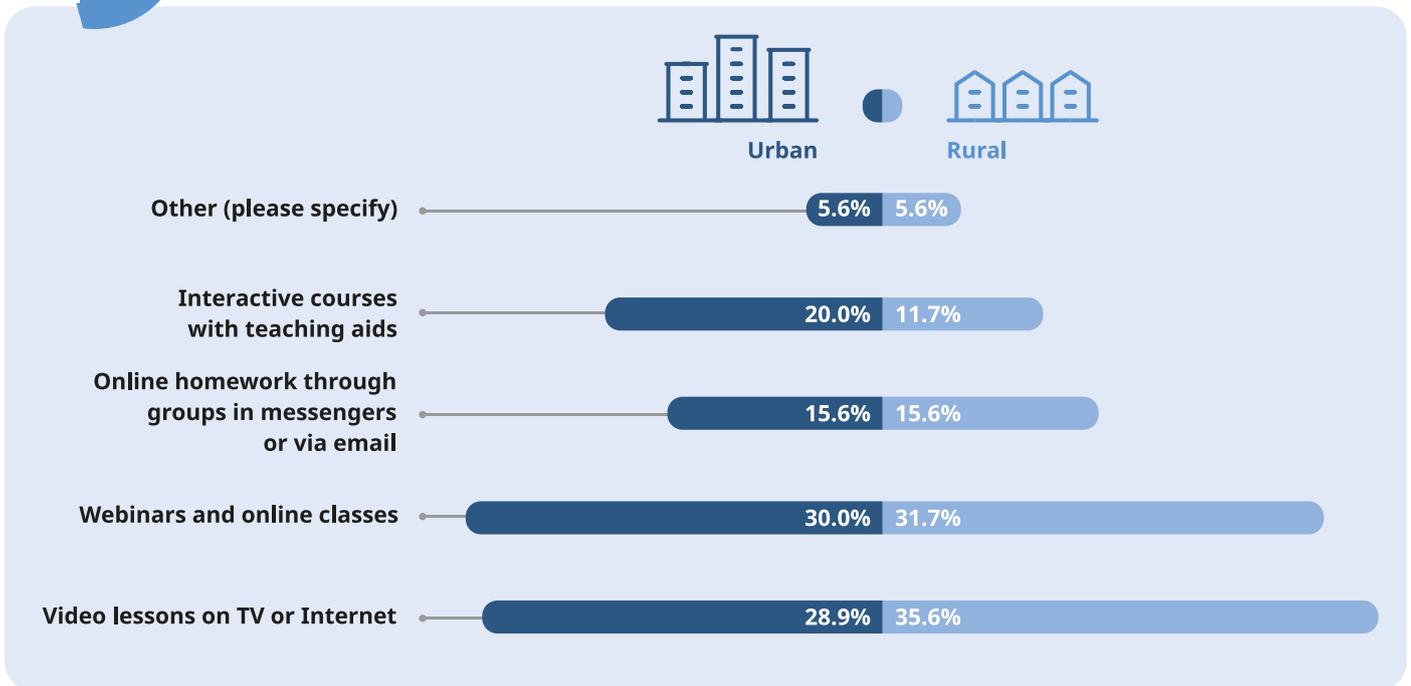
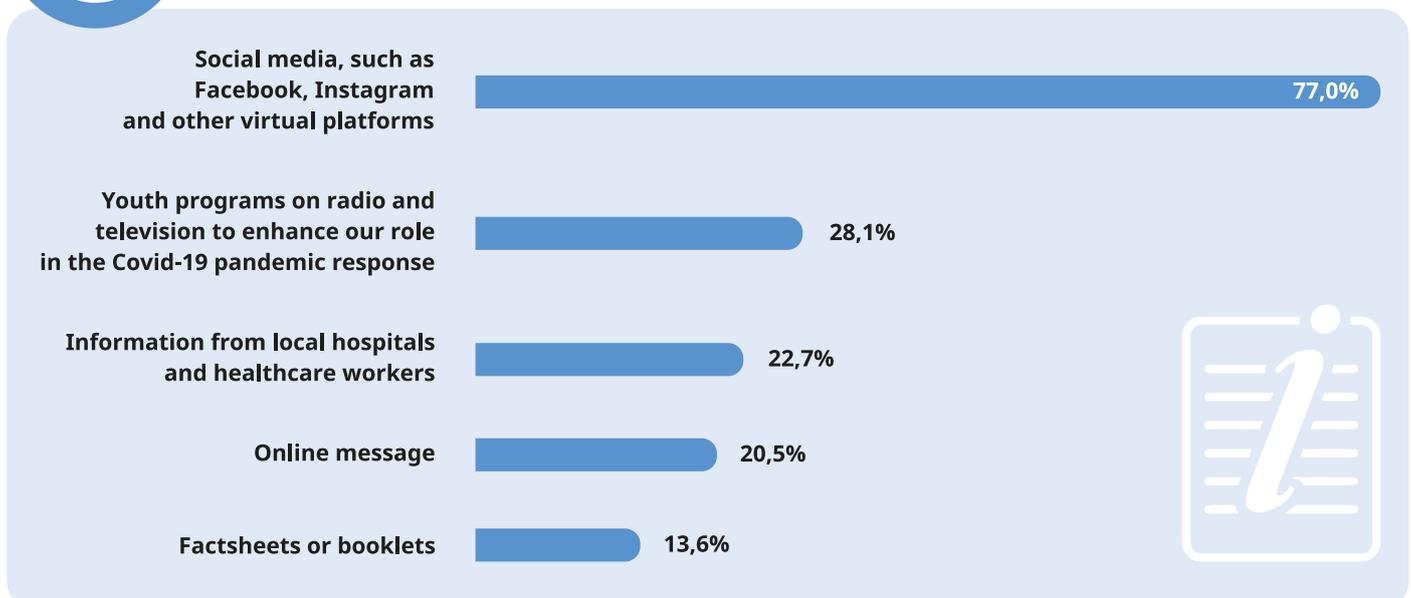


Diagram 115.
Ways for UN agencies to share information and provide support during the COVID-19 pandemic (%)



According to respondents, the best way for UN agencies to share information and provide support in the COVID-19 pandemic fight is to use social media, such as Facebook, Instagram and other virtual platforms (77.0%). Factsheets and booklets are the least popular channel of information.

Rural population tends to trust local hospitals and healthcare workers more (25.4% of young people from rural areas think this information channel is trustworthy). A relatively high percentage of rural young women aged 24-29 years rely on factsheets and booklets (19.5%).

Like the main group of respondents, the majority of vulnerable young people think an important step to support others during the COVID-19 pandemic is to disseminate reliable information through a range of channels. However, unlike the main group, vulnerable groups believe stopping violence and stigmatization of violence victims is the second important thing to do (37.8%). Three times more young people in the vulnerable group believe they play no role in the combat with the coronavirus (18.4%).

For vulnerable groups, the best way of coping with the COVID-19 pandemic is effective management of (work with) infected people (53.1%), followed by accessible and reliable information through public channels (44.8%). The next most frequently chosen answers were more funds for COVID-19 testing; food, water, medicines, essential supplies and electricity; and online learning opportunities (30-39%).

The most effective online learning formats are webinars and online classes (44.7%).

Answering the open question about potential ways to engage youth in prevention and containment of the coronavirus (COVID-19) infection, the respondents chose the following:

- Volunteering—engaging young people in volunteer work to support those in need;
- Online marathons, challenges, social media contests, flash mobs;
- Online meetings and webinars on COVID-19;
- Online learning and entertainments;
- Social videos, online announcements, content by popular bloggers to engage more young people;
- Financial incentives, education discounts;
- Social and patriotic videos;
- Hygiene and self-isolation.

Responses to the open question about what should be done to help young people to better cope with physical self-isolation during the pandemic include:

- Intellectual video and online classes, webinars, access to online courses, free Internet, access to online libraries;
- Sports and physical activity to maintain health;
- Films and interesting books;
- Psychological support;
- Material support (personal protective equipment)

CONCLUSIONS AND RECOMENDATION

The survey shows that the COVID-19 pandemic has negatively affected income, work, including unpaid domestic work, mental health and education of young people in the country.

The majority of young people do not have accurate and reliable information on infection risks, means of protection and access to healthcare in relation to COVID-19. All groups of young people, regardless of their education level, suffer from shortage of such information.

The most trustworthy channels of information for youth are family, official government sources and online news outlets.

The level of awareness about issues that are not directly related to COVID-19 depends on the education level and age of respondents. People with higher education are better informed about such things as stress coping strategies, violence against women and girls and where to go in case of violence, violence against children and where to go in case of violence, access to reproductive health and sexual education, and access to social protection services (monetary or food aid).

The majority of young people were provided with all basic necessities for the lockdown by their parents. It should be noted that female respondents were more dependent on their parents. Most respondents rated their preparedness level (in terms of available information, food and medicine supplies) as adequate.

The most popular means of personal protection are face masks, antiseptics and handwashing. Girls and young women are more likely to follow protection guidelines.

The biggest concerns for young people are their health and health of their family and friends, general situation in the country and income. A relatively high percentage of young people does not feel anxiety or stress at all (this is mostly true for young men). Girls and young women show higher levels of anxiety. Concerns over earnings are typical for young people in the oldest age group.

A common reaction to lockdown restrictions among young people is uncertainty as to whether the country and society are moving in the right direction as they see no significant changes in their everyday lives. Girls and young women are more likely to have pessimistic expectations.

The majority of young people (especially girls and young women) think the lockdown provided a positive opportunity for family bonding. Young men did not report any significant changes in their family relationships. Most girls and young women think their domestic workloads have increased. By contrast, young men believe they have learned to manage their time better, while girls say they do not have time to manage all of their responsibilities.

The majority of students switched to online learning and think their achievement progress has not been affected. In summer, most young people are going to self-study and look for a side job.

Many respondents reported a decrease in their family income. As for employment, there were no changes. The lockdown did not affect levels of anxiety over job security. These are girls mainly who are worried about their future work. They are planning to look for additional income sources after the pandemic.

The majority of currently unemployed young women lost their jobs due to the lockdown. Most respondents (young women mainly) do not have any plans for work after the quarantine.

According to the respondents, the best ways to support youth in employment are business mentorship programs and soft loans, as well as professional development and training programs. While girls and young women are interested in developing new skills, young men pin their hopes on soft loans. The most in-demand professional skill for youth is the knowledge of foreign languages.

The majority of respondents did not need any medical help, but when they did, they received it. Most frequently consulted healthcare professionals were dentists and general practitioners.

For youth, the main source of information on sexual and reproductive health and rights is Internet.

Since the coronavirus outbreak, there has been an increase in alcohol and tobacco use among young men aged 24-29 years. Teenage girls (15-18 years old) suffered from online bullying and sexual harassment and, more than others, from self-harm attempts during the pandemic. Vulnerable groups faced challenges much more often than the main group of respondents: 13.3 percent experienced online bullying or sexual harassment; 8.2 percent started to use more recreational drugs, 10.2 percent started to consume more alcohol or tobacco, and 4.1 percent tried to harm themselves.

The majority of respondents know about domestic violence from the Internet mainly. In case of domestic violence, they are going to seek help. The most popular sources of help are law enforcement agencies and crisis centers (shelters).

During the lockdown, social activity of young people was limited to information sharing with relatives and friends via social media. Active forms of support are more typical for young men.

At the same time, with adequate resources, young people believe their mission is to provide reliable information on how everyone can contribute to fighting the pandemic. The majority of respondents noted the lack of credible information.

The most favorite online learning formats are video lessons on TV and Internet, webinars and online classes. The most popular channel of information on the pandemic is social media.

In vulnerable groups, levels of awareness are 5 to 7 percent lower on average as compared to the main (majority) group of respondents. Like in the main group, trending issues are related to COVID-19. Vulnerable youth is relatively poorly informed about access to COVID-19 related healthcare services and learning opportunities during the pandemic. They also show a slightly

lower level of trust in official government channels of information. Vulnerable groups were significantly less prepared for the lockdowns in financial matters, such as purchasing food, personal protection equipment and medicines for the quarantine period. While the main group of respondents worried most about their health and situation in the country, vulnerable groups were concerned more with health of their families and friends and impacts on income and employment. Analysis of responses from vulnerable groups shows a negative trend in family relationships as compared to the majority group of respondents, with vulnerable youth experiencing abuse and violence more often.

As for income, vulnerable groups were relatively positive about their financial situation as compared to the main group. In particular, 4.8 percent of respondents from vulnerable groups reported a significantly increase in earnings.

Vulnerable youth provided differing (as compared to the main group) responses to the question about access to medical help. There were more respondents who feared contracting the coronavirus and long queues in medical facilities. The survey shows that exactly one-half of respondents knew where to go in case of domestic violence. The percentage of respondents from the majority group who chose this answer was slightly higher. However, only 10.2 percent of respondents from vulnerable groups would seek help in case of domestic violence, which is two and a half times less than in the main group. Vulnerable groups are much less likely to trust police, but tend to trust crisis centers.

In terms of civic engagement, vulnerable groups are much more active as compared to the main group.

For vulnerable youth, the best forms of support for coping with the COVID-19 pandemic are effective management of (work with) infected people and accessible and reliable information.

RECOMENDATION

- Develop an information and communication strategy for timely delivery of reliable and readily understandable information on the pandemic, available means of protection and measures taken by authorities. It is also important to use not only those communication channels that are popular among youth (such as Internet platforms and messengers), but also traditional channels such as TV and radio to provide information to older family members;
- Design a readily understandable, coherent and consistent national strategy to protect society from the pandemic using a variable combination of protective and incentivizing lockdown measures;
 - Formalize distance learning and online teaching technologies in legislation;
- Develop a national soft loan and tax holidays program for small and medium-sized businesses and incentivize banks and other financial institutions to join this program;
- Formalize social entrepreneurship in legislation with provision of tax benefits to entrepreneurs;
- Develop and roll out a professional digital and IT training program for youth;
- Incentivize foreign and domestic investors and donors to support small and medium-sized businesses through business incubator programs, start-ups, hackathons, etc.;
- Design a program for the provision of integrated consulting, information and legal online support services by healthcare workers, psychologists and lawyers on medical, psychological and legal protection and support of population during the lockdown.

APPENDIX 1. SURVEY QUESTIONS

Youth Survey Questionnaire (in English)

**Interviewer's
name:**

A. Phone call date

Date:

day/month/year

Start time:

hours/minutes

End time:

hours/minutes

Hello, my name is _____

UN in Kyrgyzstan is conducting a youth and COVID-19 survey in Kyrgyzstan to respond to the needs of young people during the coronavirus pandemic.

The survey data will help UN understand how to support youth and address coronavirus impacts.

The survey includes interviews with young people. This questionnaire is anonymous and all data will be used in a general format only (as diagrams, spreadsheets, etc.).

Your voice and participation are very important to us. Thank you in advance.

Are you ready to answer my questions?

A. Please let me first ask you some general questions:

COMPONENT 1. General information

No	Question	Answers	#	Code	Go to
01-01	Province/city	Bishkek city		1	
		Osh city		2	
		Naryn		3	
		Talas		4	
		Chui		5	
		Batken		6	
		Issyk-Kul		7	
		Jalal-Abad		8	
		Osh		9	

01-02	Ethnicity (please specify)			
01-03	What area do you live in?	Urban	1	
		Suburbs	2	
		Rural	3	
01-04	Gender	Woman	1	
		Man	2	
01-05	How old are you?	15-18 years old	1	
		19-23 years old	2	
		24-29 years old	3	
01-06	What is your education level?	No education	1	
		Primary (1-4 grades)	2	
		Incomplete secondary (1-9 grades)	3	
		Secondary (11 grades)	4	
		Vocational (technical school or college)	5	
		Incomplete tertiary	6	
		Tertiary	7	
		Postgraduate/academic degree	8	
01-07	What is your marital status?	Not married	1	
		Married	2	
		Divorced	3	
		Widowed	4	
		Other (please specify)	5	
01-08	Which of the following describes you best at the moment??	I work (employed or self-employed)	1	Component 4.2.
		I am a student (school/vocational college/university/training course, etc.)	2	Component 4.1
		I am a working student	3	Component 4.3.
		I neither work nor study	4	Component 4.4.
		Other (please specify)	5	
01-09	How many people do you permanently live with (including you)?	01-09-1 I live alone	1	
		01-09-2 Number of children aged 0-14 years	2	
		01-09-3 Number of young people aged 15-19 years	3	
		01-09-4 Number of young people aged 20-24 years	4	
		01-09-5 Number of young people aged 25-29 years	5	
		01-09-6 Number of adults aged 30-60 years	6	
		01-09-7 Number of older people aged 60+ years	7	
01-10	Which of the following protective measures have you used in the past 7 days (please select from the list)?	Used a face mask	1	
		Used disposable gloves	2	
		Used disinfectants or antiseptics	3	
		Washed hands with soap for 20 seconds or more	4	
		Avoided touching my face	5	
		Avoided handshaking	6	
		Avoided public gatherings/long queues	7	
		Avoided touching things/surfaces in public places	8	
		Avoided public transport	9	

	Maintained social distancing (no less than 1.5 meters)	10
	Other (please specify)	11

COMPONENT 2. Awareness

No	Question	Answers	Code	Go to
01-01	During lockdown, did you receive information about the following (please select from the list)?	Risk of infection with COVID-19	1	
		How to protect yourself against COVID-19	2	
		How to deal with stress	3	
		Prevention of violence (domestic violence, gender-based violence)	4	
		Violence against women and girls and where to go in case of violence	5	
		Violence against children and where to go in case of violence	6	
		About access to medical services related to COVID-19	7	
		About access to psychological services and support	8	
		About access to reproductive health and sexual education	9	
		How to continue the study during the pandemic (do not read if the respondent is not a student)	10	
		About access to social protection services (financial or food aid)	11	

No	Questions	Answers	Not helpful at all	Slightly helpful	Very helpful	I do not use this source
02-02	How helpful was information on COVID-19 from the following sources? [every item should be answered]	02-02-01 Official government information (all information channels, including TV, websites, social media)	1	2	3	4
		02-02-02 United Nations (UN), World Health Organization (WHO)	1	2	3	4
		02-02-03 TV news	1	2	3	4
		02-02-04 News websites (akipress.kg, 24.kg, etc.), including their accounts on Instagram, Facebook, etc.	1	2	3	4
		02-02-05 School/university/teacher	1	2	3	4
		02-02-06 Family/parents	1	2	3	4
		02-02-07 Friends/relatives, neighbors	1	2	3	4
		02-02-08 Medical establishment/ family doctor	1	2	3	4
		02-02-09 NGO/civil society organizations	1	2	3	4
		02-02-10 Other (please specify)	1	2	3	4
		02-02-11 I do not know anything about COVID-19 coronavirus			0	

№	Questions	Answers	Code	Go to
02-03	How well were you prepared at the beginning of the COVID-19 outbreak and lockdown (in March when the emergency situation and state of emergency were declared)? (several answers are possible)	I bought necessary personal protective equipment and medicines	1	
		I stocked up with food supplies for the lockdown period	2	
		I gathered enough information about the virus and made every effort to avoid infection	3	
		I was not prepared because I did not have enough resources	4	
		I was not prepared because I did not have enough information	5	
		Nothing changed, I live as before	6	
		Parents provided me with everything	7	
		Other (please specify)	8	
02-04	What other information on COVID-19 and related issues do you and your peers need?			

COMPONENT 3. Current psychological state

How true of you are the following statements? (Please rate all answers on a scale from 1 to 5 where 1 is strongly disagree (a) and 5 is strongly agree (a))

No	Questions	Strongly disagree (a)	Disagree (a)	Neither agree, not disagree (a)	Agree (a)	Strongly agree (a)
03-01	I feel calm and relaxed	1	2	3	4	5
03-02	I am worried when I think about the situation in the country	1	2	3	4	5
03-03	I am worried about my health	1	2	3	4	5
03-04	I am worried about health of my family and friends	1	2	3	4	5
03-05	I am worried about my earnings and impacts on the work (do not read this if the respondent doesn't work)	1	2	3	4	5
03-06	I feel comfortable leaving home/shopping	1	2	3	4	5
03-07	I am overloaded with study/work	1	2	3	4	5
03-08	I feel uncertain about my future because of COVID-19	1	2	3	4	5
03-09	I am comfortable with my income/financial support that I receive	1	2	3	4	5
03-10	I do not feel connected with friends/peers (lack of meetings, physical contacts)	1	2	3	4	5

COMPONENT 4. COVID-19 impacts on your life

No	Questions	Answers	Code	Go to
04-01	How did the COVID-19 pandemic impact your life? (several answers are possible)	Nothing changed in my everyday life	1	
		My life changed for the better	2	
		My life changed for the worse	3	
		I am uncertain about where we are going	4	
		I am scared	5	
		I do not know (do not read this)	6	
04-02	How did your household responsibilities change during the lockdown ?	I connected really well with my family and got to know them better	1	
		I was arguing with my family more	2	
		I experienced abuse or violence	3	
		Nothing changed	4	
		Other (please specify)	5	

No	Questions	Answers	Code	Go to
04-03	How did your household responsibilities change during the lockdown ?	My responsibilities increased	1	Component 4.1. - 04-05 Component 4.2. - 04-11 Component 4.3. - 04-16 Component 4.4. - 04-24
		My responsibilities decreased	2	
		Nothing changed	3	
		Other (please specify)	4	

COMPONENT 4.1. Questions for students (school/university students)

No	Questions	Answers	Code	Go to
04-04	How did your household responsibilities impact your study? (several answers are possible)	I do not have time for homework	1	
		My relationships with classmates and teachers got worse	2	
		I learned how to manage my time	3	
		Other (please specify)	4	
04-05	Did the coronavirus outbreak interrupt your study?	No, we continue to study as before	1	04-07
		Yes, my school/university was closed but we had online classes	2	
		Yes, my school/university was closed and all classes were cancelled	3	
		Yes, some classes were cancelled, but my school/university is open	4	
		Other (please specify)	5	
04-06	What was your education process like during the lockdown? [please select all answers that apply]	I did background reading (books/textbooks) on my own without teacher's guidance	1	
		I had online classes with my teacher and class/groupmates	2	
		I watched pre-recorded lectures on TV/YouTube	3	
		I would do my homework and email it to my teacher	4	
		We used WhatsApp/Viber/Telegram chats for communication and learning	5	
		We had an active study group on Skype, Facebook, etc.	6	
		We had online classes, but I could not continue because I had no access to Internet, TV or a personal computer	7	
		We had online classes, but I could not continue because my domestic workloads increased	8	
		Other (please specify)	9	
		None of the above	10	

Appendix 1. Survey questions

04-07	Do you think that infection outbreak affected your achievement progress?	No, my achievement progress did not change	1	
		My studies are postponed	2	
		I fell behind in studies	3	
		I will have to quit	4	
04-08	How did your family income change after the coronavirus outbreak?	Family income increased significantly	1	
		Family income increased insignificantly	2	
		Family income did not change	3	
		Family income decreased insignificantly	4	
		Family income decreased significantly	5	
		I do not know about my family income	6	
04-09	How are you going to spend your time during summer holidays?	Work on my parents' land	1	Component 4.5., Question 04-28
		Look for a side job	2	
		Self-study	3	
		Rest	4	
		Other (please specify)	5	

COMPONENT 4.2. Questions for working youth

No	Questions	Answers	Code	Go to
04-10	How did your household responsibilities impact your study/work? (several answers are possible)	I do not have time for my job	1	
		My working day increased significantly so I work late hours	2	
		My relationships with coworkers and supervisors got worse	3	
		I learned how to manage my time	5	
		Other	6	
04-11	How did your work change after the COVID-19 outbreak ?	Increased	1	
		Not changed	2	
		Decreased by I did not lose my job	3	
		I lost my job	4	
		I do unpaid domestic and household work	5	
		Other (please specify)	6	
04-12	Because of the coronavirus outbreak, I ...	Feel very positive about my job opportunities	1	
		Feel positive about my job opportunities	2	
		Feel about my job opportunities the same as before the outbreak	3	
		Am worried about my job opportunities	4	
		Am very worried about my job opportunities	5	
04-13	How did your income change after the coronavirus outbreak?	Income increased significantly	1	04-27
		Income increased insignificantly	2	04-27
		Income did not change	3	04-27
		Income decreased insignificantly	4	04-14
		Income decreased significantly	5	04-14
04-14	How are you going to restore your income after the pandemic?	Look for a formal job on my own	1	Component 4.5., Question 04-27
		Look for an informal job on my own	2	
		Go to the employment service of MoLSD	3	
		Try to start up a business	4	

Work in agriculture on my or family land	5
Become a migrant worker	6
Look for additional sources of income (side job)	7
Not applicable	8
Other (please specify)	9

COMPONENT 4.3. Questions for working students

No	Questions	Answers	Code	Go to
04-15	How did your household responsibilities impact your study/work? (several answers are possible)	I do not have time for homework/job	1	
		My working day increased greatly so I study/work late hours		
		My relationships with coworkers and supervisors got worse		
		My relationships with classmates and teachers got worse		
		I learned how to manage my time		
		Other		
04-16	Did the coronavirus outbreak interrupt your study?	No, we continue to study as before		04-18
		Yes, my school/university was closed but we had online classes		
		Yes, my school/university was closed and all classes were cancelled		
		Yes, some classes were cancelled, but my school/university is open		
		Other (please specify)		
04-17	What was your education process like during the lockdown? [please select all relevant options from the list]	I did background reading (books/textbooks) on my own without teacher's guidance		
		I had online classes with my teacher and class/groupmates		
		I watched pre-recorded lectures on TV/YouTube		
		I would do my homework and email it to my teacher		
		We used WhatsApp/Viber/Telegram chats for communication and learning		
		We had an active study group on Skype, Facebook, etc.		
		We had online classes, but I could not continue because I had no access to Internet, TV or a personal computer		
		We had online classes, but I could not continue because my domestic workloads increased		
		Other (please specify)		
None of the above				
04-18	Do you think the infection outbreak affected your achievement progress?	No, my achievement progress did not change		
		My studies are postponed		
		I fell behind in studies		
		I will have to quit		

Appendix 1. Survey questions

04-19	How are you going to spend your time during summer holiday	Work on my parents land	1
		Look for a side job	2
		Self-study	3
		Rest	4
		Other (please specify)	5
04-20	How did your work change after the COVID-19 outbreak ?	Increased	1
		Not changed	2
		Decreased by I did not lose my job	3
		I lost my job	4
		I do unpaid domestic and household work	5
		Other (please specify)	6
04-21	Because of the coronavirus outbreak, I ...	Feel very positive about my job opportunities	1
		Feel positive about my job opportunities	2
		Feel about my job opportunities the same as before the outbreak	3
		Am worried about my job opportunities	4
		Am very worried about my job opportunities	5
04-22	How has your income or income of your family changed since the coronavirus outbreak ?	Income (personal, family) increased significantly	1
		Income(personal, family) increased insignificantly	2
		Income (personal, family) did not change	3
		Income (personal, family) decreased insignificantly	4
		Income (personal, family) decreased significantly	5
04-23	How are you going to restore your income after the pandemic?	Look for a formal job on my own	1
		Look for an informal job on my own	2
		Go to the employment service of MoLSD	3
		Try to start up a business	4
		Work in agriculture on my own or family land	5
		Become a migrant worker	6
		Look for additional sources of income (side job)	7
		Not applicable	8
		Other (please specify)	9

COMPONENT 4.4. Questions for unemployed (those who neither work, nor study)

No	Questions	Answers	Code	Go to
04-24	I do not work because...	No need, I have everything for living	1	
		I was unemployed before the coronavirus outbreak	2	
		I do not work now because of the coronavirus, but I did not lose my job	3	
		I lost my job because of the coronavirus	4	
		I do unpaid domestic and household work	5	
		Family reasons (pregnancy, care after elderly parents, etc.)	6	
		Health issues	7	
		I've been looking for a job for a long time, but without success	8	
		My parents provide me with everything	9	
		I do not want to work	10	
		Other (please specify)	11	
04-25	Из чего состоит источник нынешний Ваш доход и доход Вашей семьи? (можно выбрать несколько вариантов ответа)	Salary/wage	1	
		Livestock farming/agriculture	2	
		Labor migration	3	
		Business (entrepreneur, self-employed, business owner)	4	
		Pension, allowances	5	
		Other (please specify)	6	
04-26	Какие у Вас планы после пандемии?	Look for a formal job on my own	1	04-27
		Look for an informal job on my own	2	
		Go to the employment service of MoLSD	3	
		Try to start up a business	4	
		Work in agriculture on my own or family land	5	
		Become a migrant worker	6	
		Look for additional sources of income (side job)	7	
		Not applicable	8	
		Other (please specify)	9	

COMPONENT 4.5. Questions for all respondents

No	Questions	Answers	Code	Go to
04-27	What support measures will give you more job opportunities after the pandemic, including business startup opportunities? (several answers are possible)	Professional development or training programs	1	
		Employment support programs	2	
		Business mentorship programs	3	
		Soft loans, including in agriculture, to start up a business	4	
		Other (please specify)	5	
04-28	What skills do you need to have more job opportunities? (several answers are possible)	Computer skills	1	
		Programming	2	
		Accounting	3	
		Foreign languages	4	
		SMM, social media business and online sales	5	
		Trade-specific knowledge and skills (offline)	6	
		Skills and knowledge in agricultural development or agribusiness	7	
		Other (please specify)	8	

COMPONENT 5. Access to healthcare

No	Questions	Answers	Code	Go to
05-01	Did you need any medical help after the coronavirus outbreak?	Yes	1	05-02
		No	2	05-05
05-02	If yes, did you seek medical help?	Yes and I received help	1	
		Yes, but I did not receive help	2	
05-03	Did you or your friends/relatives have any problems with access to healthcare? (several answers are possible)	No, I/my friends had no problems with access to healthcare	1	05-05
		Yes, there was no doctor	2	
		Yes, there was no personal protective equipment for patients	3	
		Yes, long queues	4	
		Yes, healthcare facility was hard to access (physically)	5	
		Yes, no transport to go to the healthcare facility	6	
		Yes, fear of contracting COVID-19	7	
		Yes, too expensive services	8	
		Other (please specify)	9	
05-04	What healthcare services were the least accessible during the coronavirus outbreak?	General practitioner	1	
		Dentist	2	
		Obstetrician/gynecologist /urologist	3	
		Surgeon	4	
		E.N.T. specialist/ophthalmologist	5	
		Psychologist	6	
		Dermatologist	7	
		Traumatologist	8	

		Speech therapist	9	
		Neurologist/psychiatrist	10	
		Other (please specify)	11	
05-05	Where do you get information on sexual and reproductive health and rights from?	From my family doctor	1	
		From my gynecologist	2	
		Printed healthcare materials	3	
		Family discussions	4	
		School classes and discussions	5	
		Internet	6	
		Documentary films	7	
		Social media	8	
		Hotlines	9	
		Peers/friends	10	
		Other (please specify)	11	
		I do not receive such information	12	

COMPONENT 6. Challenges and awareness about help

Are the following statements true of you? (Please rate all answers on a scale from 1 to 5 where 1 is strongly disagree (a) and 5 is strongly agree (a))

No	Questions	Strongly disagree (a)	Disagree (a)	Neither disagree, nor agree (a)	Agree (a)	Strongly agree (a)
06-01	I/my peer/friend suffered from online bullying or sexual harassment during the pandemic	1	2	3	4	5
06-02	I/my peer/friend started to use more recreational drugs	1	2	3	4	5
06-03	I/my peer/ friend started to use more alcohol and tobacco	1	2	3	4	5
06-04	I/my peer/friend have tried to harm myself/themselves since the start of the COVID-19 outbreak	1	2	3	4	5

No	Questions	Answers	Code	Go to
06-05	Do you know about cases of domestic violence in your community during the lockdown?	Yes	1	05-02
		No	2	05-05
		I do not know (can't answer)	3	
		Yes, I read about this on the Internet, but not in our community	4	
06-06	Как Вы думаете, обращаются ли Ваши сверстники в случае домашнего насилия за помощью?	Yes, the majority seek help	1	05-05
		No, only a few seek help	2	
		No, nobody reports violence	3	
		I do not know (can't answer)	4	

Appendix 1. Survey questions

06-07	Do you know where to seek help and support in case you or your family members experience domestic violence (e.g. how to ask for help and protection or get psychological support?)	Yes	1	06-10
		No	2	
		I do not know	3	
06-08	Do you know any hotlines in case you or your family members experience violence?	Yes	1	06-09
		No	2	
		I do not know	3	
06-09	What hot lines do you know about?			
06-10	Would you seek help in case of domestic violence?	Yes	1	06-11
		No	2	07-01
		I do not know	3	07-01
06-11	Куда бы вы обратились, если бы пострадали от домашнего насилия?	Police/law enforcement agency	1	
		Crisis center	2	
		Hospital	3	
		School/university	4	
		Elderly (aksakal) court	5	
		Women council	6	
		Ombudsman	7	
		Other (please specify)	8	

COMPONENT 7. Civic engagement

How true of you are the following statements? (Please rate all answers on a scale from 1 to 5 where 1 is very untrue (a) and 5 is very true (a))

No	Questions	Very untrue of me	Untrue of me	Hard to say	True of me	Very true of me
07-01	I make and give out face masks and personal protective clothing; make/raise donations to buy medical equipment and help hospitals and healthcare workers	1	2	3	4	5
07-02	I deliver food and medicines, provide information on the pandemic, contact people in need by phone or via Internet, etc.	1	2	3	4	5
07-03	I am an active member of an NGO/youth organization / youth-led action group that supports people who need help in the COVID-19 crisis	1	2	3	4	5
07-04	I help disseminate information via social media about how to protect yourself from the COVID-19 infection	1	2	3	4	5

07-05	I participate in online initiatives that support youth-led civic engagement	1	2	3	4	5
07-06	I discuss actively all COVID-19 related news on my social media account	1	2	3	4	5
07-07	I contact my friends, family and relatives regularly to find out how they are coping with the crisis	1	2	3	4	5

No	Questions	Answers	Code	Go to
07-08	Did your volunteer work change after the COVID-19 outbreak ?	No, I was not a volunteer before the pandemic and I am not a volunteer now	1	
		No, I do as much volunteer work as I did before the pandemic	2	
		Yes, I spend more time on volunteer work now	3	
		Yes, I spend less time on volunteer work now	4	
		Yes, I was a volunteer before the pandemic, but I am not now	5	
		Yes, I was not a volunteer before the pandemic, but I am now	6	

COMPONENT 8. Needs and help expectations

No	Questions	Answers	Code	Go to
08-01	If you had capacity and resources, what would you want to do to support yourself and others during the COVID-19 pandemic? (several answers are possible)	Provide reliable information on how everyone could help contain the spread of the COVID-19 infection	1	
		Together with friends, disseminate reliable information in creative ways (posters, music, songs, dancing, etc.)	2	
		Stop violence and stigmatization of violence victims	3	
		Engage in advocacy work with leaders and healthcare workers to spread reliable information through public channels (news agencies, radio, television)	4	
		This is a huge problem, I can't do anything to help	5	
		This is government's responsibility	6	
		This is healthcare workers' responsibility	7	
		I do not think I play any role in the COVID-19 pandemic fight	8	
08-02	What support do you and your communities need to better cope with the COVID-19 pandemic (several answers are possible)	Accessible and reliable information from public channels	1	
		More financial resources for COVID-19 testing	2	
		Food, water, medicines, essential supplies, electricity	3	
		Effective management of infected individuals	4	
		I need a consultation (psychological)	5	
		I need online entertainments	6	
		I need online learning opportunities	7	
		I need opportunities to continue learning offline	8	
I need self-learning opportunities	9			

Appendix 1. Survey questions

		I need information on how to protect myself from domestic violence	10	
		I need better social protection (financial allowances, housing and public utilities benefits, tax benefits, employment information, soft loans)	11	
		Other (please specify)	12	
08-03	Which online learning format would be effective for you?	Video classes on TV or Internet	1	
		Webinars and online classes	2	
		Online assignments via messenger groups or email	3	
		Interactive courses with teaching aids	4	
		Other (please specify)	5	
08-04	What is the best way to share information with you and support you during the COVID-19 pandemic? (several answers are possible)	Online messages	1	
		Social media, such as Facebook, Instagram and other virtual platforms	2	
		Factsheets or booklets	3	
		Information from local hospitals and healthcare workers	4	
		Youth programs on radio and television to enhance our role in the COVID-19 pandemic response	5	
		Other (please specify)	6	
08-05	What do you think are good ways to engage youth in the coronavirus (COVID-19) prevention and control?	Open question	1	
08-06	What do you think should be done to help young people to cope better with physical isolation during the pandemic?	Open question	1	

Thank you for your time and trust!

Interviewer's statement:

I hereby certify that this interview was conducted in accordance with the survey guidelines. The information in this questionnaire fully represents the views of the respondent.

Interviewer's name: _____

Signature _____

