## **COVID-19 SERIES**

**ETHIOPIA** 

August 2020



# Experiences of vulnerable urban youth under covid-19: the case of domestic workers

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## Introduction

Ethiopia declared the first case of coronavirus on the 13 March 2020, and while numbers of confirmed cases initially remained low, by late July 2020 the number of confirmed cases had exceeded 15,000, with over 200 deaths. Across the globe countries are reporting multidimensional health, economic and social effects of covid-19 and the ensuing policy responses to contain the disease. The situation is expected to be potentially more challenging in low-income countries like Ethiopia where there is a weak health system, compounded by recurrent political unrest. The outbreak of covid-19 is expected to put women, girls, young people and socially vulnerable groups, including persons with disabilities, at heightened risk, given that containment measures to slow the pandemic including lockdowns and disruption of basic services are already being seen to exacerbate existing economic and social inequalities (UN, 2020). Rapid virtual research by GAGE has highlighted the challenges that young people are facing in rural communities in Afar, Amhara and Oromia, and in Dire Dawa city (Jones et al., 2020a, b), but as yet very little is known about the specific experiences of vulnerable urban youth. This brief focuses on domestic workers (aged 14–24 years), and is part of a series exploring the impacts of covid-19 and the ensuing government policy response on vulnerable urban youth in Ethiopia.



## Overview of domestic workers in urban Ethiopia

Ethiopia's domestic workers have been the focus of intermittent attention for nearly two decades (Kifle, 2002). Research has found that nearly all (90%) are girls, a large majority are migrants from rural areas (75% to 97% depending on the study), many are escaping child marriage (25%) and abusive home conditions (especially related to step-parents), nearly half (49%) have never been to school, and a small minority (8%) are under the age of 15 (Erulkar and Mekbib, 2007; Erulkar et al., 2007; Erulkar and Ferede, 2009; Kedir and Rodgers, 2018; DeRegt, 2020). With domestic work excluded from Ethiopia's labour laws, and necessarily taking place behind closed doors, young domestic workers regularly face exploitive work conditions and all forms of violence, including rape (ibid.). Indeed, a recent survey from the Population Council found that the average domestic worker began work at the age of 15, worked 53 hours in the last week and made only USD22 a month (Erulkar et al., 2017). That survey also found that domestic work often serves as a springboard to commercial sex work, in part because of the increasing involvement of brokers linking girls and jobs, and in part because adolescent girls are often using their meagre wages to support family members and are looking to grow their incomes (ibid.).

## Research methodology

The findings in this brief are based on qualitative research interviews carried out by phone in June 2020 with vulnerable urban youth in local languages. The youth were residents of the major urban centres of the three largest regional states in Ethiopia: Adama (Oromia region), Bahir Dar (Amhara region) and Hawassa (Southern Nations, Nationalities and Peoples region), as well as Addis Ababa, the federal capital. The sample of young people was drawn from a combination of beneficiaries of UNFPA-funded NGO programmes in the four locations and purposely sampled adolescents who belonged to specific socially vulnerable categories. Young people were included from two age cohorts – 15–19 years and 20–24 years. In total, 154 youth were included in the research, of whom 100 were female and 54 were male; 79 aged 15–19 years and 75 aged 20–24 years. Among these, 16 were domestic workers (see Table 1 for the sample details), including both those who live with their employers ('live-in') and those who live separately ('live-out'). A total of 19 key informants from the city bureaus of health, labour and social affairs, women, children and youth affairs as well as NGOs working with vulnerable urban youth in each city were also interviewed virtually.

		Addis Ababa	Adama	Bahir Dar	Hawassa	Total
Sex	Female	5	4	4	3	16
	Male	-	-	-	-	
Marital status	Never married	3	4	4	3	14
	Married	1	-	-	-	1
	Divorced	1	-	-	-	1
Age	14–19*		1	4	3	8
	20-24	5	3			8
	Total	5	4	4	3	16

#### Table 1: Research sample of domestic workers by location, gender, age and marital status

\* While we recognise that the internationally agreed definition of youth is 15–24 years old, one of the domestic workers in our sample was 14 years old.

## Findings

We now turn to a discussion of the findings from the virtual research with domestic workers about their experiences since the outbreak of covid-19 in Ethiopia.

#### Covid-19 knowledge and practice

The domestic workers in our sample had mixed levels of knowledge about covid-19. Some had a good understanding of disease transmission and protection mechanisms due to access to TV and radio in their employers' homes, whereas a number said that they were not allowed to watch TV and only picked up bits of information from neighbours or friends.

In terms of practice, all noted that they were following hand-washing precautions and many were using masks, especially 'live-out' domestic workers. As a 20-year-old live-out maid from Adama noted: '*It is a difficult time. People do not approach us because of fear. If I do not wear a mask, they do not allow me to work. People change their face when we come back from outside.*' Several explained that they were also expected to wear a mask in the house, as a 20-year-old live-in maid also from Adama explained: '*When I serve them food, I have to wear a mask. I take it off when I get back to the kitchen.*' A 14-year-old live-in maid in Bahir Dar, however, noted that while her employer's family all had masks she did not as they have not provided her with one, even though she was also asked to carry out errands outside the home. '*Everyone in the family except me uses a face mask. I haven't been given a mask although I go to the shop to buy small items.*' Some respondents also noted that they felt more at risk as they are responsible for providing water and soap to family members when they re-enter the house. There was also a sense from some domestic workers that people's practice regarding covid-19 precautions was waning over time. A 20-year-old live-in maid with a physical disability residing in Adama observed: '*It is similar to HIV/AIDS. When it first came, everyone was afraid of it and now it is forgotten. It is the same with Corona. People are used to it now. We do not think we will get infected anymore.*'

# .....

#### Access to sexual and reproductive health services and supplies

Overall our respondents reported that they were generally healthy and in case of illness employers of live-in domestic workers take them to a clinic or the pharmacy for medication and in some cases menstrual hygiene products. Several of the live-out maids were either using long-term implants or purchased contraceptives from the pharmacy, in contrast to the live-in girls and young women who reported that they currently were not in a relationship and were also not using contraceptives. Given that many live-in domestic workers rely on their employers to take them to the health clinic, limited privacy may also detract them from seeking out sexual and reproductive information and services. Indeed, while a key informant from the Bureau of Labour and Social Affairs in Adama noted that prior to the outbreak of covid-19 they had



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(An 18-year-old live-in domestic worker in Hawassa)

organised trainings for domestic workers on SRH issues at night schools together with the Bureau of Women, Children and Youth with UNICEF funding, the majority of respondents noted that they had little access to sexual and reproductive health education and had not been tested for HIV or STIs. One domestic worker, a 25-year-old divorcee living in Addis Ababa, noted that she had health complications including cervical pain and a continuous flow of menstrual blood but lacked the money to get a medical check-up. Because of her illness she is planning to discontinue her work but due to the covid-19 situation has limited alternative livelihood options.

# Vulnerability to violence

Vulnerability to verbal violence was a common theme that emerged from the interviews with domestic workers, although it is possible that due to limited privacy during the interviews this may represent under-reporting of other forms of violence. A 20-year-old live-in maid in Adama observed, for example: 'There is no love in the house. Because they do not have money, there is no peace in the house. They no longer get along. Not having money makes them frustrated. This has been difficult on me. There is no understanding in the family.' In terms of verbal violence, a 20-year-old live-in maid in Adama explained: 'My aunt treated me like a dog. You do not expect such treatment from your own blood. I cannot go back home because my family is poor. And I do not want to go back to my aunt. That is why I am being nice to the children of my employers in the house and working diligently.' Several others noted that they were often poorly treated by the children in their employer's house and were sometimes verbally insulted, but tried to tolerate it given their economic precariousness. A small minority noted that they sometimes faced physical violence. An 18-year-old live-in domestic worker in Hawassa reported: When I break some items in the house, my employer calls me a "horse" and she even hits me at times.' Only one spoke about the risk of sexual violence, noting that she had recently had to change houses because her previous male employer had repeatedly

come into her room when the female employer was working late. Accordingly, she is thankful that at her current house of employment she has a separate room in a separate building and feels safe.



#### Psychosocial impacts of the pandemic

Our findings suggest that domestic workers are suffering from multiple levels of stress during covid-19. A number of respondents highlighted that they were very concerned about the pandemic and the risks to their health. As a 25-yearold live-in maid from Addis Ababa emphasised: '*I am worried about my health and nothing else. Even when I sit in front of the TV, I cannot pay attention because of my worry about my health.*' Many also underscored that separation from their families and peers as a result of covid-19 was a key concern, and that employers often restricted their access to social networks. A 20-year-old live-out maid from Adama noted: '*When my employers give me a phone to call my family, I have to talk in front of them. They do not want me to meet people. They fear I will leave the house if I talk to other people ... I get headaches when I think about my family. I have to support them, but I cannot do so in a way I want and that worries me.*' Similarly, a 16-year-old live-in maid from Bahir Dar explained: 'I feel sad to not be able to visit my family and relatives *because of corona.*' A number of respondents also noted that they had been unable or unwilling to take their monthly leave entitlement since the start of the pandemic, and that this was aggravating their stress and anxiety.

Adolescent girls who were attending school prior to the pandemic were especially concerned about being disconnected

# I feel sad to not be able to visit my family and relatives because of corona.

from their peers. An 18-year-old live-in maid in Bahir Dar emphasised that 'I used to have friends but I am detached from them now.' A 14-year-old domestic worker in Bahir Dar made a similar observation: 'I am not happy since school is closed. I like education ... Before or after corona, we don't have a social life. We stay in the house at all times. Because my employer doesn't allow me to go to the neighbour's house.'



#### Economic impacts and access to social protection

Heightened economic vulnerability during covid-19 was highlighted as a priority concern among live-in and especially live-out domestic workers in all four cities. As a key informant from the Bureau of Labour and Social Affairs in Bahir Dar emphasised: 'Domestic workers, especially intermittent domestic workers, are among the most affected young people in the current context ... For example, there are about 20 domestic workers in one local broker's rented house with five very small rooms where they live in group (i.e. four in each separate, but very small, room) since nobody wants to employ them as a domestic servant after the outbreak of covid.' Many respondents noted that they were receiving lower salaries (and in one case no salary) since the pandemic because employers were unable or unwilling to pay them their regular salary, and that they had very little scope to negotiate. As a 20-year-old live-in maid in Adama explained: 'Because I have to work I do not complain about the salary. They used to pay us 200 birr and now some even give us 50 birr [per day]. And I cannot negotiate because there is no other work.' Another 25-year-old live in maid in Addis Ababa who was previously earning 1,500 birr and was now being paid 1,000 birr after several months of unemployment reasoned: 'I couldn't just sit without work. There are no other jobs. They say, at the broker's [office], business has been slow.' Another 18-year-old domestic worker in Hawassa who works for her relative who is involved in commercial sex work and who lives separately with the relative's young child, experienced the economic downturn in terms of declining food allocations from her employer: 'Now my employer has started to measure the amount of ingredients that she gives me as the price of food items has risen.'

Several live-out domestic workers emphasised that their ability to pay rent was now threatened, and that landlords were in some cases insisting on timely payments or in other cases raising fees which compelled them to move accommodation. A 25-year-old live-out maid in Addis Ababa explained: *When I told my landlords I will pay rent after few days, they shut me out for eight days. People do not understand. I have to pay rent on the exact day.*' Similarly, a 20-year-old now live-in maid in Adama noted: *When the landlords wanted us to leave, they made us pay for the water. We had to pay 2 birr per day. They also increased the rent from 400 birr to 600 birr. People are no longer caring; they have lost their humanity.*' Indeed, as the companion policy brief in this series on street-connected youth argues, some domestic workers have found themselves without employment and without a social safety net, and have therefore ended up on the streets during the pandemic.



## Conclusions and implications for policy and programming

Our findings highlight that domestic workers are facing heightened vulnerabilities during covid-19, exacerbating already precarious livelihoods given that domestic work remains outside standard labour law protections in Ethiopia. Here we highlight priority actions to address these risks:

# 1. Ensure that public health messaging about preventative messages includes domestic workers and their employers

While most domestic workers seem to have reasonable levels of awareness about covid-19 prevention measures, not all are being supported to wear masks especially when they are undertaking work-related activities outside of the house. Accordingly, it is important that public health messaging explicitly addresses the responsibilities of employers of domestic workers to provide masks and sanitisers as part of their duty of care. These messages could be integrated into the protocols of the health workers carrying out door-to-door temperature checks to determine which persons need covid-19 tests in large urban centres, given that many domestic workers are home-bound.

# 2. Ensure sexual and reproductive health education and information about services is provided to domestic workers

Most domestic workers in our sample were not in a relationship but they also noted that they had not had an opportunity to access sexual and reproductive health-related education and information. It would therefore be important to provide more targeted outreach to this cohort of vulnerable young people so that they have adequate knowledge about how to protect themselves and how to access necessary services and care.

#### 3. Develop a code of conduct for employers of domestic workers regarding respectful treatment

Given that domestic workers reported routine verbal violence and very limited scope to negotiate their rights especially during the covid-19 pandemic, it is important to continue to advocate for domestic workers to be recognised under Ethiopian labour law and in accordance with UN Convention 189. In the interim, a code of conduct for employers of domestic workers regarding respectful treatment could be developed and awareness-raising undertaken through media campaigns.

#### 4. Invest in psychosocial support services, especially through peer-to-peer models

Many domestic workers are highly socially isolated and this has been exacerbated during the pandemic with the closure of regular schools and night schools. To address this, investing in peer-to-peer psychosocial support services in the community should be explored, and potentially offered through community youth centres.

#### 5. Rapidly scale up the urban PSNP

Give that domestic workers in the current economic downturn are highly vulnerable as most undertake domestic work as a result of poverty and/or abusive family backgrounds, it is critical that the urban Productive Safety Net Programme (PSNP) includes within its eligibility criteria adolescent girls and young women who many have lost employment in domestic work and that the programme is able to include them as beneficiaries in a timely way. This is particularly important for live-out maids who are especially vulnerable to job loss during the pandemic.

### References

- DeRegt, M. (2020) 'Agency in constrained circumstances: adolescent migrant sex workers in Addis Ababa, Ethiopia' *Journal of Eastern African Studies*, 14(3): 512–528
- Erulkar, A. and Ferede, A. (2009) 'Social exclusion and early or unwanted sexual initiation among poor urban females in Ethiopia' *International Perspectives on Sexual and Reproductive Health* 35(4): 186–193
- Erulkar, A. and Mekbib, T.A. (2007) 'Invisible and vulnerable: adolescent domestic workers in Addis Ababa, Ethiopia' *Vulnerable Children and Youth Studies*, 2(3): 246–56
- Erulkar, A., Mekbib, T., Simie, N. and Gulema, T. (2007) 'Migration and Vulnerability among Adolescents in Slum Areas of Addis Ababa, Ethiopia' *Journal of Youth Studies*, 9(3): 361–374
- Erulkar, A., Medhin, G. and Negeri, L. (2017) *The journey of out-of-school girls in Ethiopia: Examining migration, livelihoods, and HIV*. Addis Ababa: Population Council
- Jones, N., Gebeyehu, Y., Gezahegne, K., Iyasu, A., Tilahun, K., Workneh, F. and Yadete, W. (2020a) 'Listening to young people's voices under covid-19. Exploring adolescents' experiences and priorities in Ethiopia under covid-19.' Policy brief. London: Gender and Adolescence: Global Evidence.
- Jones, N., Małachowska, A., Guglielmi, S., Alam, F., Abu Hamad, B., Alheiwidi, S. and Yadete, W. (2020b) 'I have nothing to feed my family...' Covid-19 risks pathways for adolescent girls in low- and middle-income countries. Report. London: Gender and Adolescence: Global Evidence
- Kedir, A. and Rodgers, P. (2018) 'Household survey evidence on domestic workers in Ethiopia' *The Service Industries Journal*, 38(11/12): 824–840
- Kifle, A. (2002) *Ethiopia Child domestic workers in Addis Ababa: A rapid assessment.* Geneva: International Labour Organization
- United Nations UN (2020) One UN Assessment: Socio-Economic impact of Covid-19 in Ethiopia. Addis Ababa: UN Ethiopia

### Endnote

1 Suggested citation: Amdeselassie, T., Emirie, G., Gezahegne, K., Jones, N., Presler-Marshall, E. and Yadete, W. (2020) 'Experiences of vulnerable urban youth under covid-19: the case of domestic workers.' Policy brief. London: Gender and Adolescence: Global Evidence.

The research for this brief was generously funded by UNFPA Ethiopia and by UK Aid. We have listed authors alphabetically to reflect equal contribution to this research output. We gratefully acknowledge peer review comments from Meron Negussie at UNFPA and Estibel Mitiku from the Ministry of Women, Children and Youth. We also thank Anna Andreoli for editing and formatting support.



This briefing is an output of the GAGE programme funded by UK Aid from the UK government. The views expressed and information contained within do not necessarily reflect the position of UNFPA, the United Nations Population Fund, nor the UK government's official policies and are not endorsed by the UK government, which accepts no responsibility for such views or information or for any reliance placed on them.



ISBN: 978-1-913610-09-8