



COVID-19 Lockdowns Hurt Women's Nutrition Security

Research underscores the need for reinforcing safety-net programs with a focus on women

Study Overview

TCI researchers used Consumer Pyramids Household Survey data on food expenditures and rapid phone-based surveys to analyze the COVID-19 pandemic's impact on the availability of non-staple and staple foods, as well as its effect on women's diet diversity at the national, state, and district levels in four economically challenged districts of Uttar Pradesh (Maharajganj), Bihar (Munger), and Odisha (Kandhamal and Kalahandi).

Background

In response to the spread of COVID-19, the Indian government instituted a nationwide lockdown in March 2020 and lasted through May 2020. Disruptions to agricultural supply chains subsequently led to price fluctuations, especially for nonstaple foods. The difference between staple and nonstaple foods is crucial because an increase in calorie deficit arising from reduced consumption of staples is distinct from a worsening quality of diets that affects nutrition security. The lockdown also resulted in a loss of employment opportunities, putting an estimated 8–32 million Indians at risk of not being able to afford nutritious food.

RESULTS

The TCI study shows that food expenditures significantly declined, especially in less developed districts. Most concerning, the drop was due to decreased consumption of foods like meats, eggs, vegetables, and fruits, which are rich in micronutrients that are crucial to good health and development. Nearly 90% of survey respondents reported having less food, while 95% said they consumed fewer types of food. Expenditures returned to pre-lockdown levels in June 2020 at the national and state levels but remained low at the district level, suggesting that underdeveloped regions were disproportionately affected by access and availability constraints.

The surveys also suggest a decrease in the quantity and quality of nutritious foods consumed by women. For example, some women said that during the lockdown they halved the amount of dal that they prepared, or that they prepared thinner dals. The number of women consuming vitamin A-rich fruits and vegetables dropped by 42%. Furthermore, the closure of Anganwadi centers cut women off from an important source of nutrition, with 72% of eligible household losing access to services.

POLICY RECOMMENDATIONS

- Diversify PDS offerings beyond wheat and rice to include micronutrient-rich foods like coarse grains and pulses.
- Expand services provided through Anganwadi centers, such as hot-cooked meals and take-home rations, to ensure that vulnerable members within households have access to micronutrient-rich foods.
- Bolster direct benefit transfer and cash transfer schemes like MNREGA to shield households from income loss and support food access.
- Invest in improved infrastructure for perishable food supply chains to maintain price stability and improve availability of micronutrient-rich foods like fresh fruits and vegetables.
- Design safety-net programs and rural development programs with a focus on redressing women's unequal access to food.

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