

30. How to ensure effective government responses as COVID-19 spreads to rural areas

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As COVID-19 began spreading globally in early 2020, it quickly went [beyond major cities](#) to affect rural areas in much of the world. In low-income countries, rural health systems have been overloaded and periodic lockdowns and other restrictions have driven down incomes. Governments have responded to the economic turmoil with an array of [social protection](#) programs, and through public health campaigns pushing both safe behaviors and vaccination and providing treatment. As our [2019 IFPRI Policy Brief](#) shows, ensuring high-quality governance and provision of services in rural areas is critical for livelihoods and economic development – and thus central to COVID-19 policy responses.

Yet researchers and practitioners have [focused](#) mostly on the governance problems that COVID-19 poses in urban areas, given greater exposure [risks](#) for infection there. But COVID-19 severely affects health, livelihoods, and incomes in rural areas, which face a distinct set of pandemic challenges deserving special attention.

In the United States, COVID-19 is killing rural Americans at [twice](#) the rate of people in urban areas, in part because of challenges in reaching such individuals with health services and deploying vaccinations. COVID-19 is similarly a critical threat with unique implications for rural areas in [low- and middle-income countries](#). As of the end of 2021, [only 9 percent](#) of people in Africa had been vaccinated, with [rural areas](#) facing the greatest shortages.

First, logistical and communications obstacles complicate the provision of services, including vital pandemic-related [health](#) and [agricultural services](#) and [other assistance](#). For example, a lack of amenities like high-quality roads, health clinics and hospitals, well-trained health workers, and cold-chain environments (for vaccine storage) can make [reaching rural areas](#) hard or impossible.

Second, rural areas are *especially* reliant on government services. Rural citizens are typically poorer than their urban counterparts, and thus relatively less likely to be able to [afford](#) private services. This same poverty and relatively lower education levels may also reduce demand for vaccines or treatments, furthering COVID-19's spread. COVID-19 is also particularly dangerous for older individuals, and [rural areas](#) generally have higher proportions of older citizens.

Third, rural areas are generally more remote and thus less connected to the central government and its policy response efforts. So-called [urban bias](#), which has resulted in policies that are ill-tailored to rural needs, may similarly affect the quality of COVID-19 policy responses for rural areas. COVID-19 also has the potential to further weaken connections between the central government and rural areas, potentially further undermining the responsiveness of policymakers to rural needs.

Fourth, many migrants are returning to rural areas – possibly spreading disease, straining local labor markets, or triggering conflict. Available [evidence](#) shows that while densely populated urban areas in various countries were the hardest hit in the first half of 2020, the spread of infection was fast to the rural areas and COVID-19 mortality rates increased rapidly – particularly from August 2020 onward.

Lastly, the food system itself critically depends on rural areas, where most food originates; farmers need access to markets not only for their outputs, but also for vital inputs and services. Few current COVID-19 policies, however, focus on sustaining [food production](#). Moreover, in many developing countries, [agriculture ministries](#) are conspicuously absent in national and subnational COVID-19 response committees.

Responding to COVID-19 and ensuring that high-quality services reach the rural poor demands a range of actions by governments, donors, and organizations on the ground. They must provide high-quality information to keep rural citizens informed of vital public health information about the virus and its spread, policy responses, and the availability of vaccines and treatments; stimulate rural enterprises and food production to mitigate disruptions to food supply chains and rural livelihoods; and mobilize citizen monitoring of government to foster two-way communication between governments and rural citizens.

Provide high-quality information on COVID-19, health, and nutrition

Misinformation about COVID-19 comes in many forms, and rural areas are at particularly high risk. Misguided and potentially harmful COVID-19 recommendations include [ingesting disinfectants](#), applying [disinfectant sprays](#), [not using second-hand clothes](#), taking [unproven drugs](#) or [herbal remedies](#), and [avoiding vaccines](#) widely recognized as being safe and effective. Rural areas – with a disproportionately high share of the poor – are least equipped to bear the costs of following such advice, especially amid a severe economic downturn. In many low-income countries, fears of COVID-19 infection have kept people from seeking necessary [healthcare](#) and accessing COVID-19 [vaccines](#), and misinformation about transmission has even reduced [seafood](#) and [meat](#) consumption – possibly posing a missed opportunity for improving rural diet quality and nutrition.

To ensure that rural residents receive – and believe – high-quality information, governments and development practitioners should work with institutions, organizations, or universities that people trust. In urban areas, we have already seen the [benefits](#) of strong communications programs to dispel misinformation. Similar strategies should be employed in rural areas. For example, information dissemination in some African countries has involved [recruiting](#) village leaders, religious figures, traditional healers, and youth to ensure that public health messages reach people and resonate. Further, low-tech solutions such as [Talking Books](#) and [innovative delivery of nutrition education](#) are helping communicate culturally appropriate messages on COVID-19, health, and nutrition in rural areas and establish community feedback channels.

Stimulate rural enterprises and food production

Even as it disrupts the food supply chain, COVID-19 simultaneously presents opportunities for income generation for rural citizens. Some countries have imposed export restrictions to protect domestic food supplies, which can lower food availability and raise prices in low-income countries that [import](#) much of their food. But this is also an opportunity to ramp up local food production, including homestead gardening, to boost food and nutrition security, and for returning migrants and the unemployed to generate income.

Agricultural and food businesses should be kept open. Agricultural inputs should be allowed to freely move to ease supply-side restrictions. Loan programs and temporary waivers on taxes and customs duties can help agricultural input suppliers and service providers. Temporary input packages, cash transfers, or loan programs can help smallholder producers, processors, and traders cope with disruptions. Producers and workers will also need protective gear, free COVID-19 testing, access to safe and effective vaccines, and improved water and sanitation.

To further stimulate local food production during the crisis, [seed distribution](#) and agricultural extension is more essential than ever. Information and communications technologies (ICT) can disseminate information and facilitate payments and logistics – but are often insufficiently available in rural areas. Subsidized data plans and [training on their use](#) may help. Radio programming also remains [central](#) for providing agriculture, nutrition, and health information in many developing countries and has proven effective in times of [crisis](#). There are now numerous examples of support from associations or governments for [innovative agrifood marketing](#), [online sales](#), [shorter and more efficient distribution systems](#), and [diversification to agrifood products](#) with increased demand during the crisis – which have helped in addressing major marketing issues faced by rural producers.

Mobilize citizen monitoring of government

As they respond to COVID-19, governments and organizations need consistent [access to information](#) about citizens' preferences and demands, and about how frontline service providers are performing. In rural areas, which are often out of the media spotlight, and where health-care [providers](#) may be less equipped or face less scrutiny than their urban counterparts, citizen input is extremely important as new health and social protection responses are rolled out.

Addressing COVID-19-related governance problems and responding to citizens' needs requires tracking infections, hospitalizations, and deaths, as well as vaccine deployment. It involves provision of health-related services (including water and sanitation – such as handwashing stations) and vaccines where they are needed most. It also requires knowing where citizens are finding effective treatment and vaccines versus being turned away. Crisis-related tensions and conflicts, including [land disputes](#), in rural areas also need to be monitored. These efforts all require strong and continued communication with rural service providers and citizens.

ICT may facilitate these goals during lockdowns and social distancing measures. Through ICT, rural residents can indicate what needs are or are not being met – providing the government with information and pressuring it to be responsive. ICT can also be used for contact tracing to control

outbreaks, [critical in rural and peri-urban communities](#) that are seeing people moving in from cities. Strong grassroots groups and organizations can also promote effective and inclusive planning, design, and monitoring of government programs, and can contribute to more effective [livelihood support](#) to rural citizens. For example, in Viet Nam, [Rapid Action Teams](#) comprised of community stakeholders, along with the rapid scale-up of telehealth, have proven particularly important for remote rural communities during the pandemic.

Opportunities for transformative change in times of crisis

According to a [United Nations Development Programme study](#), despite the Ebola epidemic occurring at the same time, living standards in Sierra Leone improved faster between 2013 and 2016 than in 70 other poor countries. Huge donor funding permitted increased expenditures in health and nutrition, with substantial benefits. COVID-19 could inspire similar efforts.

Like the Ebola crisis, COVID-19 provides opportunities to reverse longstanding inequalities and biases. But that requires supporting effective and responsive rural service delivery that safeguards the welfare of the poorest citizens while ensuring food security in rural and urban areas alike.

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