

Exploring Social Exclusion Perceptions Amidst the COVID-19 Pandemic: Insights from Europe

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1. Introduction

Since its emergence in December 2019, COVID-19 has had far-reaching consequences for societies around the globe. It is unanimously recognized by scholars and policymakers that the effects of the COVID-19 pandemic go far beyond physical health, impacting individuals' and communities' everyday lives and well-being, including in the domains of education, employment, family life, and mental health. Moreover, COVID-19 had a disproportionate impact on vulnerable persons. Even in countries with well-developed responses, the outbreak and its repercussions imperil the basic well-being of social groups whose livelihoods are already precarious.

According to several studies, the most vulnerable persons are more at risk of being and of feeling socially excluded (e.g. Maestripieri 2021). The pandemic may have exacerbated their situation. EU policies have addressed social exclusion for a long time, with the Commission's 1992 Communication 'Towards a Europe of solidarity' (COM (92) 542) describing social exclusion as the result of "mechanisms whereby individuals and groups are excluded from taking part in the social exchanges, from the component practices and rights of social integration and of identity. Social exclusion goes beyond participation in working life; it is felt and shown in the fields of housing, education, health and access to services". Combating poverty and promoting social inclusion is a central objective of the European policy agenda.

Although there is no universally agreed definition or benchmark for social exclusion, lack of participation in society (i.e., lack of participation in or exclusion from economic, political, cultural, civic and/or social life) is the focus of almost all definitions proposed by scholars, government agencies, non-governmental organizations, and others. Participation can be hampered when people lack access to material resources (e.g., income, employment) and essential services, such as education and health care, or when they cannot express their voices, interact with each other, and when their rights are not equally respected (see United Nations 2016). During the Covid-19 pandemic, social distancing and lockdown measures posed new threats to social participation that added to the pre-existing social exclusion mechanisms.

Building on the assumption that COVID-19 did not affect everybody's lives in the same way and that the pandemic is socially patterned not just in terms of COVID-19 morbidity and mortality rates, but also in terms of the impact of the implemented restrictions and emergency lockdown measures (Bambra et al., 2020), the aim of this paper is to study the self-perceived social exclusion of EU citizens, taking into account their socio-demographic characteristics and the different contexts of their country of residence. Our research hypothesis is that, during the pandemic, social exclusion depended also on the specific country context and, in particular, on the levels of trust in government as well as on the perceived efficacy of welfare measures put in place by different countries, in addition to individual characteristics.

This research is part of the COVINFORM project an H2020 RIA which aims to assess the COVID-19 responses in a multilevel governance framework in 15 European countries. More specifically, COVINFORM project draws upon intersectionality theory and complex systems analysis in an interdisciplinary critique of COVID-19 responses on the levels of government, public health, community, and information and communications.

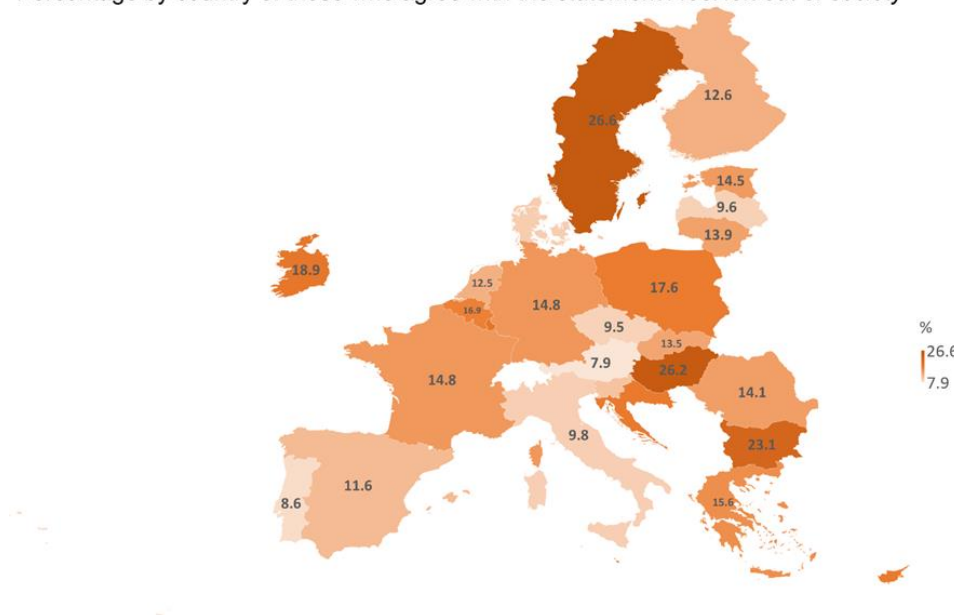
2. Data and methods

We use data from the *Living, working and COVID-19* online survey, carried out by Eurofound to collect data regarding the impact on the lives of EU citizens and policy responses to mitigate the effects. The survey was fielded online, among respondents who were reached via Eurofound’s stakeholders and social media advertising. To date, five different rounds of the survey have been completed at different stages of during 2020, 2021 and 2022 to monitor the evolving situation during the COVID-19 pandemic¹. Starting from Round 2, a panel component (in addition to the cross-sectional one) has been included; however, we only had access to cross-sectional data. This study builds on the third Round of the survey, with a sample size of 46628 individuals, carried out between February and March 2021. The choice of the time reference is motivated by two main reasons. First, at the time European countries were still dealing with various levels of lockdown. Second, after nearly a year of living with COVID-19 restrictions, we believe that the data is the most suitable to shed light on the social and economic situation of people in Europe.

Self-perceived social exclusion is captured in the survey through the following question: *To what extent do you agree or disagree with the following statement? “I feel left out of society”*. Respondents could answer by choosing between one of the following options: *Strongly Agree - Agree - Neither agree nor disagree - Disagree - Strongly disagree*. Based on this information, we built a marker of social exclusion during the pandemic: the indicator is equal to 1 if the individual agreed or strongly agreed to feel left out of society and being equal to 0 in the remaining cases. The share of individuals reporting to feel socially excluded varies between countries from a maximum of 33.2% in Cyprus and a minimum of 11.5% in Italy (Figure 2). Indeed, it is well known that social exclusion depends strongly on the country context in addition to individual characteristics and circumstances (e.g., United Nations 2016).

Figure 2 Share of individuals reporting to feel socially excluded by country (% values)

Percentage by country of those who agree with the statement *I feel left out of society*



¹ Round 1 was launched on 9 April 2020, when most Member States were in their first lockdown. Round 2 was launched in July 2020, when economies and societies were gradually reopening. Round 3 started in March 2021, as countries were still dealing with various levels of lockdown. Round 4 took place in October–November 2021, recontacting panel respondents only, to track developments since the start of the pandemic. Round 5 was carried out between 29 March and 2 May 2022, to look at how life changed in Europe after two years of pandemic. In parallel, a pilot survey was fielded in 10 neighboring countries using an adapted questionnaire. However, we only had access to cross-sectional data on EU Member States contained in Round 1, 2 and 3 of the survey.

In order to study the influence of observed variables on social exclusion at different levels (i.e. individual and country level), we implemented a series of two-level logistic regression models. The general model can be expressed as follows:

$$\text{logit}(P_{ij}) = \beta_{00} + \sum_{r=1}^p \beta_{r0} X_{rij} + \sum_{s=1}^q \beta_{0s} Z_{sj} + \delta_{ij} + \varepsilon_j \quad [1]$$

Where:

i denotes individuals and *j* denotes countries; P_{ij} is the probability of social exclusion; X_r and Z_s are explanatory variables, respectively, at the individual and country level: β_{00} is the intercept; β_{r0} and β_{0s} are the logistic regression coefficients of the explanatory variables at individual and at country level; δ_{ij} is the residual term at the individual level while ε_j is the error term at the country level (also known as a level two residual term). More specifically, we implemented four models. The first model includes only the intercept, the second model includes the intercept and the individual variables, the third model includes the country variables, and the fourth model is the full model including both country and individual variables.

Building on existing evidence on the socio-demographic variables related to social exclusion (e.g. United Nations 2016), we consider the following covariates at the individual level: gender (men, women)², age group (18-24, 35-49, 50-64, 65+), highest completed level of education (primary, secondary, tertiary), activity status (employed, self-employed, unemployed, retired, other), area of residence (village/village, city/periphery), cohabitation with spouse/partner (yes, no), presence of children up to 17 in the household (yes, no), presence of disability or chronic illness (yes, no). At the country level, on the other hand, we consider two explanatory variables: the first aims to measure general levels of trust in the government and the second to assess the efficiency of government support measures taken to deal with the health and socio-economic consequences of Covid-19. Individuals were asked to rate their level of trust in government/ their agreement with the efficiency of government support measures using a scale of 1 to 10 and a scale of 1 to 5, respectively. We built country means of these individual-level variables to produce indicators of contextual differences between countries (see also Aassve et al., 2013).

3. Selected results

Before commenting on the results, we must recall that Model 1 is the null model used to calculate the Intra Class Correlation (ICC) and provides information on how much variation in the outcome exists between level-2 units. Model 2 includes individual-level variables and, therefore, results indicate the relationship between level-1 predictors and the outcome (probability of feeling left out of society). Model 3 includes country-level variables and, therefore, results indicate the relationship between level-2 predictors and the outcome. Model 4 is the full model including both individual and country-level variables. % ICC estimates are shown in Table 1, highlighting that variability between countries is significant and accounts for 4.3% of the total variability.

Table 1 Covariance Parameter estimates

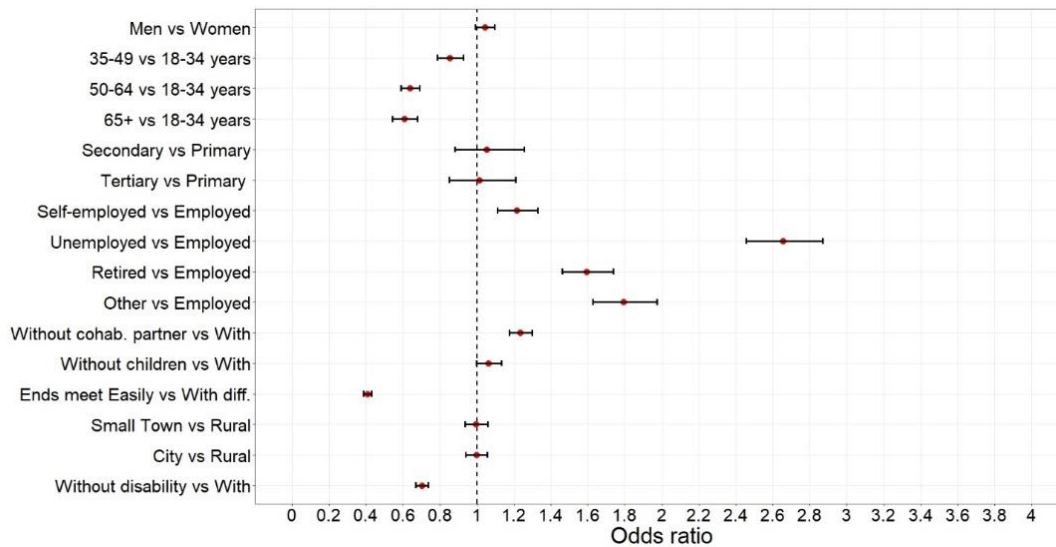
	Estimate	SE	Pr > Z	ICC %
Intercept	0.148	0.041	0.000	4.296

Looking at the results of Model 2 for individual variables in Figure 3, we found that gender is not significantly related to the probability of being socially excluded during the pandemic. Similarly, the educational attainment, the level of urbanization of the area of residence and the presence of minor children aged less than 18 years old in the household were not associated with social exclusion. Age was among the individual

² In the original data, the gender variable has three modes: men, women, other. However, due to the limited number of 'other' answers, we decided to limit our analysis to those who answered 'men' or 'women'.

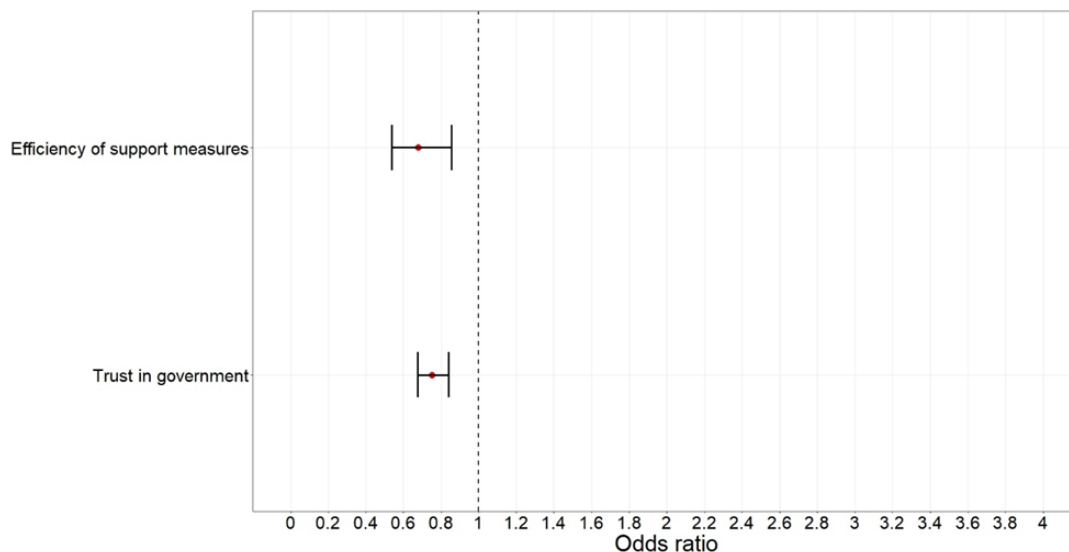
characteristics that affected social exclusion, with younger people aged from 18 to 34 years reporting greater probabilities of feeling out of society during the pandemic than those at older ages. The activity status was also significantly related to social exclusion, results show that being employed had a protective effect: employees reported lower probabilities of feeling left out of society compared to those who were self-employed, unemployed, retired or in other condition (i.e., students, housewives or unable to work). Cohabiting with the spouse/partner also shows to have a protective role. Economic resources also played a significant role: those reporting difficulties in making ends meet had higher probabilities of feeling socially excluded. Finally, having a disability or a chronic illness increases the likelihood of social exclusion.

Figure 3 Odds ratios of feeling left out of society according to individual variables (model 2)



Results for the country-level predictors are shown in Figure 4. Both trust in the government and the efficiency of public support measures introduced during the pandemic are significantly associated with self-perceived social exclusion: the higher the average country scores (corresponding to greater levels of trust and satisfaction with support measures), the lower the probability of social exclusion. Model 4 is the full model including both individual and country-level variables.

Figure 4 Odds ratios of feeling left out of society according to country variables (model 3)



Note: Effect of unit change from mean

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