



Response, recovery and prevention in the coronavirus (COVID-19) pandemic in developing countries: Women and girls on the frontlines

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This policy brief focuses on how to ensure that a gender lens is well-integrated through response, recovery, and prevention efforts to COVID-19 in development co-operation. In the context of COVID-19, how can OECD countries and other development providers improve the quality of their policies and practices for gender equality, as well as raise investments in gender equality in key sectors? Development partners will need to identify challenges and areas of risk brought about by the pandemic, as well as integrate concerns for gender equality into decision making around issues ranging from economic stimulus packages to redoubling financing and improving policies and practices across a range of sectors. This approach also implies ensuring women's representation in leadership and decision making at every level when responding to the COVID-19 crisis. This policy brief provides some arguments for why a gender-responsive recovery to COVID-19 is essential for sustainable and inclusive growth, and initial guidance for making improvements in the area of gender equality and development.



Highlights and key facts

- Today, women account for 70% of professionals, doctors, and nurses in the health sector globally, and on average around the world provide three times more unpaid care and domestic work than men. Women also face higher risks of both income loss and increased violence, sexual exploitation, or abuse in the current crisis.
- Yet, in parallel, financing and economic stimulus decision making in the current crisis context is moving so quickly that the gender lens risks being lost, and women risk being excluded.
- When adapting policies and practices in the current crisis, OECD countries and other development partners need to devote attention to reducing, and not exacerbating existing gender inequalities. They also need to balance emergency response on the one hand, with long-term development goals on the other – an objective at all times, though even more acute now.
- Development partners will need to use all tools at hand to identify challenges and risks, and integrate concerns for gender equality into major decisions on issues ranging from economic stimulus packages to redoubling financing, and improving policies and practices for gender equality and women's empowerment across a range of sectors. This approach also implies ensuring women's representation in leadership and decision making when responding to this crisis at every level, including political.
- Development finance, including official development assistance (ODA), and political will are essential in the fight against COVID-19. However, less than half – about 42% – of all bilateral aid addressed gender equality and women's empowerment in 2017-18, an all-time high even if much more can be done. This share of aid to gender equality is the same in the health sector. Only 4% of aid was dedicated to programmes focussed on gender equality as the main objective.

Box 1. OECD DAC Network on Gender Equality: 25 years of peer learning and progress

The OECD Development Assistance Committee (DAC) of 30 bilateral donors has a long history of mainstreaming gender equality throughout its work. In 1995 in Beijing, the global community agreed that governments and other actors should promote an “active and visible policy of mainstreaming a gender perspective in all policies and programmes”. The same year, the DAC endorsed gender equality as a strategic objective, and mandated its working party on gender equality to facilitate the mainstreaming of gender into DAC members' policies and practices. The DAC agreed the Guidelines for Gender Equality and Women's Empowerment in Development Co-operation in 1999, committing Members to ensure the mainstreaming of gender equality in their own processes and products, and support the efforts of partner countries to promote gender equality.

DAC members have been implementing these commitments for nearly 25 years. Today, the DAC is adapting its policies and practices to respond to the COVID-19 pandemic through regular discussions, meetings, and sharing of experiences, including relating to gender equality. The OECD guides and tracks their progress, supporting members in their efforts towards evidence-based policy development, standard setting, and collective action. An example of recent timely progress in the area of gender equality and development was the adoption of the first international standard in development and humanitarian assistance on ending sexual exploitation, abuse, and harassment in 2019 in the era of



#MeToo and #aidtoo.¹ The OECD secretariat support is based in the Development Co-operation Directorate's Global Partnerships and Policies Division in the Gender Equality and Women's Empowerment Team.

More broadly, the OECD as a standard-setting organisation proposes a range of policy tools on areas from family policy to development and effective development co-operation. The Organisation has developed other gender equality instruments on employment, education, and women in public life.

Gender-responsive donor behaviour in the coronavirus (COVID-19) response and recovery

Women and girls are being left even further behind as the COVID-19 crisis hits OECD and non-OECD countries at different stages in their development trajectories. Emerging research indicates that women are faring worse than men in the COVID-19 crisis, especially in terms of socio-economic consequences, and notably in developing countries where sharply rising poverty levels, lack of health and education services, and underlying insecurity exacerbate the negative impacts of the crisis. This context contributes to a slow response, and provides difficult conditions for recovery and prevention (UN Women, 2020^[1]). To make change happen now, members of the OECD Development Assistance Committee (DAC) must urgently embrace a vision of a gender-responsive recovery – domestically and as donors, in their engagement across their own governments and, critically, in tandem with developing country partner governments and civil society. The OECD policy paper “Women at the Core of the Fight Against COVID-19” shines a light on some of the key challenges women face during the ongoing COVID-19 pandemic, and proposes early steps that governments can take to mitigate negative consequences for women and for society at large, including through development co-operation (OECD, 2020^[2]). Making gender equality a priority through the recovery response

The deep social and economic impact of the crisis on women and girls, their well-being, livelihoods, health illustrates how urgent it is to put women at the core of recovery and longer term development efforts. To ensure the gender lens is not lost as recovery efforts are put in place, all countries should design financial recovery plans and economic stimulus packages that empower, protect, employ, and educate more women and girls.

Moreover, 2020 not only marks the 25th anniversary of the Beijing Platform for Action, but also the 20th anniversary of the UN Security Council Resolution 1325 on Women, Peace and Security. During this landmark year, and facing the vast challenges of the pandemic, it is essential that policy makers and their governments reinforce their commitments in the 2030 Agenda, which acknowledges that achieving gender equality and empowering women and girls constitutes a core pillar of sustainable, equitable, economic, and social progress.

Even before the ongoing pandemic, some researchers have projected gains of up to USD 28 trillion if gender parity is reached globally, and that potential would help drive a sustainable recovery. (McKinsey and Co., 2015^[3]). Prior to the crisis, the global cost of ignoring gender discrimination in social norms was already estimated at USD 6 trillion, accounting for a loss of 7.5% of the global GDP (OECD, 2019^[4]).

OECD countries are well-placed to take concrete steps through their development and humanitarian assistance and diplomacy efforts to help partner countries to address gender inequalities that the pandemic and the response have exposed to date. For better outcomes globally, OECD countries as donors and development partners can step up the quantity and quality of their support to gender equality and across key sectors in developing countries. At a minimum, a gender equal and inclusive recovery entails increasing their focus on aid to health and infectious disease control; governance, access to public



services, and leadership; and developing care economy approaches that recognise unpaid care work and prioritise social protection, as well as at least maintaining support for key sectors such as education at pre-COVID levels. Improving governance systems, services, and legislative environments will also be key to breaking down barriers to women's empowerment, and ensuring security and protection from violence for women and girls, which constitute other critical areas of risk in the pandemic. Across all sectors, it is important to collect sex-disaggregated data, in order to inform decision making around recovery policies; this remains a challenge in many countries, for example, as of June 2020, only 64 countries reported COVID-19 cases and deaths by sex (UN Women, 2020^[5]).

Development investments and financing for gender equality

To help mitigate further risks, DAC members need to – at a minimum – maintain their commitment to date of USD 153 billion of official development assistance (ODA) in 2019, coupled with new reflections on debt management. It will be critical to assure existing ODA levels in the context of falling external flows and tax revenues in low and middle-income countries.

To promote gender equality in the COVID-19 recovery, the share of ODA integrating gender equality, now at 42%, will need to increase; partnerships with the private sector and civil society will be essential to accomplish this. Countries should also assess how vulnerable segments of society are affected by access, or lack thereof, to recovery and stimulus packages, and should take into consideration possible effects on women and on vulnerable populations. These are also important considerations in the context of aligning public and private finance with the SDGs and the Paris Agreement.

Box 2. Fragile and conflict-affected contexts

Women and girls living in fragile and conflict-affected contexts – where poverty is increasingly concentrated and insecurity is high – will be particularly affected by the pandemic. The role of DAC members in these situations will be especially important in COVID recovery, as the majority of ODA is invested in fragile and conflict-affected contexts: 63% of country allocable ODA or about USD 76 billion in 2018.

The COVID-19 pandemic put health and food systems under major stress in these contexts, but the impact of the crisis reaches far beyond these sectors. In fragile and conflict-affected contexts, these systems are not weak in isolation, with the different dimensions of fragility amplifying systemic weaknesses, and the COVID-19 pandemic further highlights the multi-dimensional aspects of fragility and inequality. It is critical to build system resilience that integrates gender equality, and strengthen gender equality approaches in more politically informed ways (OECD, forthcoming^[6]).

Leadership and inclusion in response efforts

Women are on the front lines of this crisis at many levels, in hospitals, basic health units and schools, yet lack voice in making critical decisions (OECD, 2020^[2]). DAC members need to prevent back sliding on progress made towards gender equality in previous years. This should be done, crucially, by making efforts to ensure that women, including from marginalised groups, have a seat at decision-making tables in global contexts, as well as at the national and local levels; it is important to aim for equal representation of women in governments, parliaments, and in public life.

It should be noted that DAC members, in alignment with developing country partner priorities, have consistently invested more in integrating gender equality into governance programming than in other



sectors. More than two-thirds (68%) of bilateral donors' financial support to sectors linked to leadership (democratic participation, leadership, and elections) integrates a gender equality perspective. New government strategies and reforms – such as the advent and capacity development of ministries of gender equality, and connecting these to other parts of government, notably finance or health ministries – can be used to enable greater gender equality.

Local women's rights organisations and women's groups and movements directly support women and respond to the crisis. As quickly as possible, and at the outset of their response efforts to improving gender equality through participation and inclusion, development partners should ensure engagement with, support and funding for, women's organisations. (OECD, 2016^[7]) These groups have an in-depth understanding of the local context, including possible constraints and opportunities for women and their health, yet tend to be severely underfunded. Financial support by DAC members to non-governmental women's organisations and groups amounted to only USD 198 million on average per year in 2017-18, indicating an opportunity to increase investments.

Calls to engage with men and boys as partners for change have grown over the past decade, in particular in efforts to reduce violence against women, understand masculinities, fight misogyny, and increase gender equality overall. It is equally important to engage men when it comes to women's economic empowerment activities, in order to avoid possible backlash. The attitudes of men and boys towards gender equality and controlling behaviour and violence vary depending on social and cultural mores, and interventions need to be conducted in full awareness of these differences. Crucially, broadening the work on gender equality to include men and boys should ideally be accompanied by an increase in the volume of funds available in order to accommodate more comprehensive approaches, rather than a diversion of already scarce funds for women's empowerment (OECD, 2019^[8]).

Being a girl or woman, in particular in developing countries, intensifies the disadvantages that can be associated with other types of inequalities, such as class, race, sexual orientation, age, ethnicity, language, ancestry, religion, ability, culture, geographical location, or health and education status. More attention is needed on the women and girls who are part of poor, marginalised, or vulnerable groups (OECD, 2018^[9]). An intersectional analysis would help DAC members understand how the COVID-19 pandemic disproportionately affects different groups of people (Cadore, 2020^[10]).

Partnerships to accelerate gender equality and women's empowerment

Co-ordination, including across bilateral and multilateral donors will enable quick and more effective action to support countries and regions where women are most at risk. If all development actors could prioritise women and girls across response and recover efforts – this includes development partners, governments in middle-income and low-income countries, civil society, and the private sector – prospects for accelerating overall recovery would improve. At the same time, development partners need to find a balance between the immediate, necessary emergency response, and long-term development goals to achieve a truly sustainable recovery.

Recently, and in response to the COVID-19 crisis, evidence shows that some bilateral donors are reinforcing partnerships through increased support for multilateral organisations with a strong focus on gender equality. The COVID-19 pandemic has also highlighted how strong partnerships are a key component to be able to effectively react in times of crisis. For example, certain DAC members are relying on existing partnerships with multilateral organisations in order to deliver strong flexible mechanisms for COVID-19 response, benefiting from the expertise and resources in partnerships in order to analyse programming and funding to best support SRHR and gender-based violence interventions, for example DAC members are also working with governments and civil society, including local women's groups, to ensure that women's voices are heard and their rights are ensured.²



At the global level, several joint funds are being set up to respond to the COVID crisis. This includes for instance, the UN Global Humanitarian Response Plan, or the UN Secretary-General's Response and Recovery Fund. Development partners need to ensure that these funds integrate concerns for gender equality at the outset – that is, ensure that gender equality is not an afterthought or something that can come later, as in past crises. As a minimum requirement, all external financing should at least do no harm in regards to gender equality and women's empowerment.

Box 3. What types of funds can make the difference for women's organisations?

The Global Resilience Fund is a partnership of social justice funders committed to resourcing the activism of girls and young women in community organisations. Its objective is to counteract the negative impact of the COVID-19 crisis, which is exacerbating existing gender inequalities, by providing quick and flexible small grants to young women community activists.

The Fund is housed by Purposeful, a feminist hub set up in Sierra Leone after the Ebola crisis that receives financial support from several women's funds, civil society organisations, private foundations, and UNICEF.

Source: (The Global Resilience Fund, 2020^[11]), The Global Resilience Fund for Girls and Young Women, <https://www.theglobalresiliencefund.org/>

Shoring up response efforts through development co-operation in key sectors

International co-operation for development, and ODA in particular, can be crucial in times of crisis. It has the potential to be a transformative force to support and guide a sustainable recovery in developing countries. The constantly changing situation makes it difficult to predict the future impact on ODA, but past trends have shown its resilience and its role as a stable source of external finance for developing countries (OECD, 2020^[12]). Members of the OECD Development Assistance Committee agree, recognising ODA as “an important means of supporting national responses” to the pandemic and stating that DAC members will “strive to protect ODA budgets” during the crisis (OECD, 2020^[13]). It is critical to address gender equality and women's empowerment through all development funding in order to have a strong foundation to respond to a crisis. The quantity, quality, and impact of investments towards gender equality are important considerations; and the OECD tracks and analyses development investments by the 30 members of the DAC (OECD, 2020^[14]) and by other development actors using the DAC gender equality policy marker (OECD, 2020^[15]).

Overall, USD 49.3 billion of bilateral ODA on average per year integrated gender equality and women's empowerment in 2017-18 42% of total bilateral allocable aid, an all-time high though much more can be done. Only 4% of total aid was dedicated to programmes with gender equality as the main objective. (OECD, 2020^[16]) The 14 multilateral organisations that provided data in 2018 report around USD 29.6 billion of development aid integrated or focused on gender equality. For comparison, total bilateral aid in 2019 amounted to USD 153 billion.

Preliminary evidence on responses to the COVID-19 crisis show that DAC members' sectoral priorities linked to gender equality include gender-based violence, sexual exploitation, abuse and harassment, sexual and reproductive health, economic empowerment, and education. Several DAC members have also highlighted the need to ensure data compiled and used in crisis response and planning are disaggregated by sex. Other DAC bilateral development agencies are expanding programmes and policies



on women's economic empowerment, improving the quality of gender-related data, governance, the delivery of basic services including education, as well as women's participation and leadership (whether in political governance, parliament, the private sector).

In general, flexible funding mechanisms – such as providing core funding – have proven helpful to respond to past crises and are showing their worth again in the current pandemic, as some DAC members using flexible funding are currently able to easily adjust their programming and priorities to respond to the COVID-19 crisis with a gender lens.³

Box 4. Integrating gender perspectives in development co-operation approaches and COVID-19 response – selected examples

Some DAC members have been responding to calls at the regional and global levels (such as from the EU, or the UN, for instance) to redirect or reallocate existing resources towards the immediate COVID-19 response in order to better support partner countries. Certain members have used this opportunity to reinforce existing programmes that support gender equality, which are even more relevant in the current context. This includes for instance programmes aiming to protect against gender-based violence or support education and health systems. Flexible funding mechanisms - and the fact that these ongoing programmes have already been adapted to the local context and match conditions in the field - mean they are well-placed tools for the response to immediate needs in the local context relating to pandemic needs.

While supporting the emergency response to COVID-19 is the first priority in terms of support to developing countries, some countries are noting how the current crisis is prompting reflections for longer-term strategic interventions needed to address the structural causes of gender inequality exacerbated by COVID. This includes for instance, in the areas of social protection schemes, women's share of unpaid or informal work, women's access to financial services or digital services more broadly, availability of gender-based violence response capacities, and enhancing female networks and leadership

Source: DAC members' replies to a questionnaire and during a meeting, in May-June 2020

Financing beyond ODA

Deploying sources of support beyond ODA, including domestic resources, to deal with the COVID-19 crisis is critical. Governments need to partner with private actors to ensure sufficient funding for prevention, response, and recovery, including with private philanthropy and through blended finance⁴ for gender equality.

Out of the total funding provided by the 33 private foundations that report their support for gender equality to the OECD, USD 1.7 billion (or 27%) focused on gender equality in 2018.

In terms of investments from private sector actors that have been mobilised through a joint project with a DAC member, only 13% of the private flows in 2018 that were reported to the OECD addressed gender equality (totalling USD 626 million).⁵ At the same time, USD 680 million of DAC members' other official development flows reported to the OECD - i.e. transactions that do not meet ODA criteria⁶ – integrated gender equality. This amount corresponds to only 13% of "other flows" that were reported against the DAC gender marker.⁷ These figures indicate ample scope to increasingly address gender equality in these types of investments during crisis response efforts.



Supporting health systems to ensure continuity

A recent study of gender equity in the workforce in 104 countries finds that women account for 70% of workers in the health and social sector (Boniol, 2019^[17]). Women work as nurses, doctors, midwives, and community health workers. However, globally, women remain the least represented at the top of the “medical hierarchy” among health ministers and physicians, and hold positions of lesser authority across the bulk of the formal system (Hay, 2019^[18]).

Health services and systems are at the core of the response to the COVID-19 crisis, yet gender inequalities are replicated and reinforced in these systems, contributing to gender inequalities in health and in the crisis response. Power and hierarchy manifest in health systems in ways that make some people more likely to benefit or be supported and advance, while others are more likely to be marginalised or disempowered. This relates to not only gender inequalities, but also to social inequalities and their intersection (Hay, 2019^[18]).

The COVID-19 pandemic has overwhelmed health systems worldwide, making it harder for people to obtain the medical care they need. A rapid assessment survey undertaken by UN Women (2020^[19]) in the Asia and Pacific region indicates that more than half of the women surveyed in all countries were unable to see a doctor when they needed one. Many women are engaged in informal employment, have high levels of job insecurity, and may not have access to healthcare at a time when seeing a doctor quickly may determine survival outcomes. For example, women in Pakistan and Bangladesh are more likely than men to experience longer wait times to see a doctor, and are less likely to be covered by health insurance. In the Maldives, where public health insurance is universal, women are less likely to be covered by private top-up insurance. Only in the Philippines is this not true, where approximately one in three women (36%) are covered by health insurance as opposed to only one in four men (27%) (UN Women, 2020^[19]).

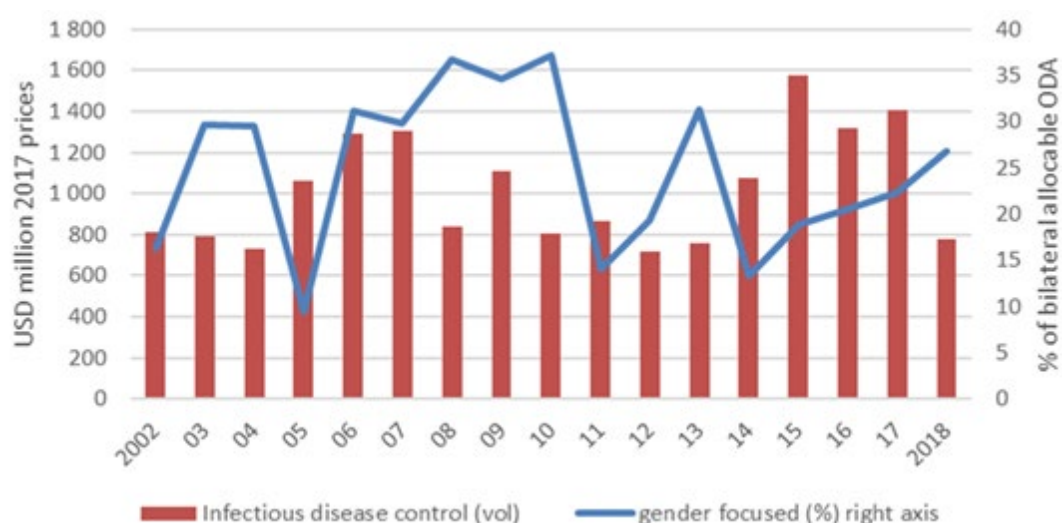
Experience from past disease outbreaks illustrates the importance of incorporating a gender analysis into preparedness and response efforts to improve the effectiveness of health interventions and promote gender and health equity goals (Wenham, 2020^[20]). During the outbreaks of Ebola and Zika, women faced many of the same threats we see today: loss of income and livelihoods, domestic violence, and lack of sexual and reproductive health services. Yet, in the face of the COVID-19 crisis, across the globe, similar patterns have been repeated.

Development partners’ support to gender equality in the health sector could be stronger. Out of DAC members’ total aid in the health sector, about 42% of bilateral aid integrated gender equality in 2017-18 – the same proportion that integrated gender equality across all sectors. This number seems surprisingly low, given that there should be consistent efforts to ensure that entire health systems are fully adapted to the needs of women and girls, including in areas such as medical research and development. In the area of infectious disease control, only 24% of aid focused on gender equality and women’s empowerment in 2017-18. While funding overall in the area of infectious disease control increased following the 2014 Ebola crisis, the share of this aid that integrated gender equality did not change accordingly (Figure 1).

In the infectious disease control sector, private foundations’ total contributions were higher than that of DAC members in 2018. However, the share of foundations’ funding in this sector that is focused on gender equality is low, at only 5% (OECD, 2020^[21]).



Figure 1. Trends of DAC members' aid to gender equality in the infectious disease control sector



Source: (OECD, 2020^[21]), Creditor Reporting System, <https://stats.oecd.org/Index.aspx?DataSetCode=crs1>.

As shown by previous experiences, there is a danger that resources may be diverted from sexual and reproductive health services, which undermines women's rights. In the space of 18 months, for instance, the Ebola outbreak in Guinea, Liberia and Sierra Leone led to a 75% increase in maternal mortality across the three countries (UN, World Bank, EU, AFDB, 2015^[22]).



Box 5. What health risks do women face across the globe and in developing countries?

Front-line health workers – the majority of whom are women – face a direct risk of illness from COVID-19. But women and girls outside the health sector face serious risks, too. Those requiring sexual and reproductive health services may face anxiety about exposure to the virus while seeking care, or they may forgo care entirely. Others have lost access to care all together due to movement restrictions and curbed health services. The World Health Organization estimates 15 million unintended pregnancies, 28 000 maternal deaths, and 3.3 million unsafe abortions across 132 low and middle-income countries over 12 months from disruptions to health services due to the COVID-19 crisis. These disruptions were also seen in the Ebola crisis and require special. Many hospitals and health centres are reporting declines in the number of women and girls receiving critical sexual and reproductive healthcare, including antenatal services, safe delivery services, and family planning. The UN Population Fund (UNFPA) and partners estimate that six months of significant health service disruptions could result in 47 million women in low and middle-income countries going without contraceptives, leading to an additional 7 million unintended pregnancies.

The number of maternal deaths is also expected to increase. UNFPA is working to ensure continued access to reproductive health services and supplies. For example, in Gambia, where the pandemic has reduced the number of women seeking healthcare, UNFPA is providing protective gear to health workers, improving community-level communications about the disease, and ensuring the continuation of family planning and midwifery programmes

Source: (UNFPA, 2020^[23]), Impact of the COVID-19 Pandemic on Family Planning and Ending Gender-based Violence, Female Genital Mutilation and Child Marriage, https://www.unfpa.org/sites/default/files/resource-pdf/COVID-19_impact_brief_for_UNFPA_24_April_2020_1.pdf.

In May 2020, 58 countries joined together to emphasise their commitment to ensuring continuity of sexual and reproductive health and rights during the COVID-19 pandemic (ONU and Délégation de France, 2020^[24]). In the areas of reproductive healthcare and population policy (excluding sexually transmitted disease and HIV/AIDS control), over 80% of DAC aid integrates or focuses on gender equality, corresponding to approximately USD 4.5 billion per year overall in 2017-18. This includes, for example, programmes providing maternal and child healthcare, and comprehensive sexuality education for adolescents. Private foundations provided an additional USD 4.9 billion of aid that integrates or focuses on gender equality in these areas in 2018 (OECD, 2020^[21]).

Preventing violence against women and girls, and sexual exploitation, abuse, and harassment

Evidence shows that rates of violence against women increase during crises and natural disasters; and many DAC members and other partners have reported a similar increase during the COVID-19 pandemic. Women and children are even more exposed to domestic violence during lockdown situations, with limited possibilities for external support. The risk is often even worse for disabled women or LGBTQI+ women (OECD, 2020^[2]). Physical boundaries and border restrictions also affect the way development and humanitarian assistance are delivered, shifting the environment and ways of working, and causing drastic economic and societal changes. Initial reports show increased violence against women around the world, with many countries reporting a rise of upwards of 25%, and in some instances, reported cases have doubled (UN Women, 2020^[1]). Globally, it is estimated that domestic violence will increase by 15 million



additional cases for every three months of continued movement restrictions and state-at-home orders (UNFPA, 2020^[23]).

The pandemic is also reinforcing or exacerbating existing inequalities – such as power imbalances, systemic gender inequalities, and gender-based discrimination – which are all bases for sexual exploitation, abuse, and harassment (SEAH) and violence against women and girls. In many developing countries, gender inequalities are exacerbated by discriminatory social norms that also have a high economic cost, due in part to their negative impact on female labour force participation, and access to education (Ferrant, 2016^[25]).

In developing countries, legal frameworks protecting women against violence tend to be weak. Prior to the pandemic, in 2019, 44 non-OECD countries did not criminalise domestic violence, according to the OECD Social Institutions and Gender Index (SIGI) (OECD, 2019^[4]). In addition, domestic violence often stems from deeply entrenched social norms and patriarchal masculinities. Early evidence shows that the social consequences of the crisis and ensuing lockdowns – e.g. inability to go outside the household, loss of social interactions, all-day presence of children following school closures, tensions inherent to forced cohabitation – likely exacerbate these social attitudes. Perpetrators of violence continue to assert or reassert control and express frustrations through increased episodes of violence (OECD, 2020^[2]).

In the wake of COVID-19, survivors' vulnerabilities increase as countries' limited capacities reduce options for external support. Existing supporting structures such as shelters, hotlines, or financial mechanisms are more limited in developing countries. On the one hand, the COVID-19 crisis further reduces the capacity of developing countries' to address survivors' needs. On the other hand, countries with limited health capabilities tend to divert all available capacities towards the fight against the pandemic, which leaves survivors with fewer resources, increasing their vulnerabilities.

Programmes that can help prevent such violence include interventions that aim to change attitudes, behaviours, and social norms around gender equality and violence against women. DAC members collectively invested USD 606 million in programmes to end violence against women and girls (VAWG) in 2018. Many of these programmes focused on outreach and dialogue activities to promote changing negative attitudes, norms, and behaviours to end gender-based violence, and improving access to high-quality services to victims of VAWG including legal assistance, psychosocial counselling, and healthcare.

In 2019, in response to widespread abuse in the aid sector, the 30 bilateral donors in the DAC adopted the *DAC Recommendation on Ending Sexual Exploitation, Abuse, and Harassment in Development Co-operation and Humanitarian Assistance* (OECD, 2019^[26]). Given the current context, and the increased risk given the implications of the pandemic, the DAC Recommendation is even more relevant than ever. Governments and the wider aid ecosystem must keep up progress to improve systems to prevent, respond to, and eliminate SEAH. Partners and DAC members must ensure that systems for the reporting and investigations into possible cases of SEAH, as well as support to victims and survivors of SEAH, are maintained.

Social protection and economic recovery

Women experience a significant burden on their time in a health crisis and as school closures and confinement measures are adopted, with multiple care responsibilities leading to reductions in working time and even possibly permanent exit from the labour market. Data from a UN Women survey (UN Women, 2020^[19]) show that women are more likely to experience increases in both domestic and unpaid care work since the outbreak of COVID-19. In addition, 40% of women workers (or almost 510 million women in 2020) are in sectors at high risk of being severely impacted by COVID-19 (International Labour Organization, 2020^[27]).

Women are also more likely than men to perform unpaid childcare, unpaid adult care, and unpaid domestic work. The biggest cuts in incomes as an impact of the pandemic are in family businesses, farming or



fishing, paid labour, and remittances. Women's incomes are affected most in all four categories. In addition, women are also more likely to report drops in income from investments or savings and in financial support from family and friends) (UN Women, 2020^[19]). Women whose income comes from casual employment may not have access to entitlements such as sick leave. With increased demands for their unpaid work, plus mobility restrictions, women may not be able to keep their micro or small businesses going.

In developing countries, many factors push women into vulnerable forms of employment, not least the need to combine unpaid work with income generation, such as part-time employment and informal work, with very limited or no social protection in areas including healthcare or insurance, and lower rates of pension and retirement coverage (OECD, 2019^[28]). It is important to understand and assess the challenges women face in order to design development programmes that are sensitive to the impacts of the pandemic. For example, women working in a market usually take their children to informal day care centres. If these close due to the pandemic, it means those women are unable to go to the market every day. Informal workers will also not be able to take many of the precautions that health authorities suggest, such as social distancing, hand washing, or self-isolation (Kinyanjui, 2020^[29]). In addition, women's part-time and unstable contracts limit opportunities for career progression. These conditions are widespread across different regions. In South Asia, more than 80% of women in non-agricultural jobs are in informal employment. In sub-Saharan Africa this figure is 74%, and in Latin America and the Caribbean 54% of women in non-agricultural jobs participate in informal employment (UN Women, 2020^[1]).

Bilateral DAC donors are already paying attention to gender equality in the area of social protection. Over 2017-18, they allocated USD 677 million on average per year in bilateral ODA that had gender equality as an objective, corresponding to 71% of aid in the social protection sector.

In the employment policy sector, 73% of bilateral ODA integrated gender equality in 2017-18: this share is an increase compared to previous years. Two grants, each of more than USD 25 million, from the EU institutions and Germany have influenced the share of aid that has gender as an objective within the employment policy area, examples of existing activities that can inform countries as they plan for COVID-19 recovery. Germany has allocated USD 59 million to the [women entrepreneurs finance initiative \(WeFi\)](#) to be managed by the World Bank as a financing mechanism to help women start and grow their businesses. The EU institutions provided a grant of USD 26 million ([EUSEESP](#)) to the Republic of North Macedonia to reduce the high rate of unemployment, by increasing labour market participation, particularly of young people and women, strengthening sector policy making and to support the implementation of the national employment, education, and social inclusion strategies. Concrete lessons from this and other sectors can be shared among DAC members and in the DAC Network on Gender Equality, drawing on existing activities as the situation unfolds.

As they move out of the COVID-19 crisis and face the economic fallout, development partners will need to increasingly support a range of economic opportunities for women and men alike, including programmes facilitating access to credit, legal support, and support for co-operatives. Currently, there is limited donor focus on gender equality in these areas. In the banking and business sector, only 26% of aid integrated or focused on gender equality in 2017-18 (OECD, forthcoming^[6]).

Increasing focus on challenges to girls' education and support to employment

As in the health sector, the majority of front line workers in education are women – along with more than two thirds of primary school teachers and more than half of all secondary school teachers in the world. While women are over-represented in the front line positions in education, globally they are under-represented as students in higher education and as professionals in the higher status positions in educational institutions and education ministries. The education gaps between the most advantaged and disadvantaged children have been widened by the COVID-19 pandemic – even in OECD countries it is estimated that these gaps may be 40% greater in 2020 than they were in 2019 because of the impact of



the pandemic. Learning losses also threaten to extend beyond this generation and erase decades of progress, not least in support of girls and young women's educational access and retention. School closures make girls and young women more vulnerable to child marriage, early pregnancy, and gender-based violence – all of which decrease their likelihood of continuing their education (World Bank and UNESCO Institute for Statistics, 2020^[30]) and (ONU and Délégation de France, 2020^[24]) (OECD, 2020^[31]).

Social and gender norms will play a role in educational investment decisions during lockdowns and school closures, and in the process of re-opening. Intra-household allocation of resources for schooling at the home and/or community-level may be redirected to boys over girls - disadvantaged girls in rural areas risks being the most adversely affected. These dynamics need to be considered in efforts to shift towards remote and home-schooling, and in related social policies. Targeted measures for the most vulnerable girls (i.e. those with no access to information and communication technologies and without a space to study at home) will also be necessary. The disruption of services with school closures can lead to an increase in the burden of care-related tasks and will likely impact girls more than boys in many contexts. This will affect the ability of girls to stay engaged in education in the longer term - girls were already over-represented in the out-of-school children population in almost all low and middle-income countries pre-COVID. Among boys, pressure to contribute to the family income may also increase with tightening economic conditions, leading to the possibility of increased numbers of boys and girls dropping out of school permanently (World Bank Group, 2020^[32]).

When women fall ill or their care burden becomes overwhelming, families will also begin to pull young girls out of school to help. This will, again, be at the expense of the education and skills development of women and girls. (Hagi Yusuf, 2020^[33]) It is notable that women's non-employment source of income, such as remittances, are experiencing a sharp decline as well.

Given the scale of the global education emergency caused by the pandemic, donors need to ensure that aid commitments to education are, at the very least, kept stable, if not increased, and focus on the most at risk, including children in emergency situations and disadvantaged girls. It is noteworthy that, over the years, only around half of bilateral aid addressed gender inequalities in education. In 2017-18, the share figure was 59%. The private flows mobilised by joint initiatives with DAC members seem to be concentrated in the sectors of education and vocational training in particular. This might provide an opportunity for strengthened partnerships on girls' education across actors; as evidence shows that for example, when private foundations and ODA donors co-invest in the education sector, foundations are helping shape initiatives at a much larger scale than they would ever reach on their own (OECD, 2019^[34]).

Recommendations and tools for a gender equal recovery through development co-operation

Across the globe, governments, civil society, the private sector, and international organisations are recognising that in the rush to respond to the current pandemic, women and girls have been left out and left behind. It is time to call for all parties to commit to a gender equal recovery in which COVID-19 research, policy responses, and development programming are tailored to support women. Governments and partners recognise the need to uphold their vital commitments to the Beijing Declaration and Platform for Action to mainstream gender equality in development and humanitarian activities, including supporting marginalised women and girls who experience multiple and intersecting forms of discrimination.

Key priorities for development co-operation in the COVID-19 response include tackling domestic and other forms of violence; ensuring access to healthcare, including sexual and reproductive health services; supporting women's livelihoods, and ensuring women's economic and political empowerment, leadership and inclusion. A checklist of recommendations for DAC members and other development partners may help to make change happen, and assist countries to escape similar errors going forward.



Development partners can aim to:

- Maintain and, wherever possible, increase commitments to development assistance – USD 153 billion of official development assistance in 2019 - coupled with new reflections on debt management, and ensure that the levels of aid focussed on gender equality grow in the COVID-19 recovery phase.
- Continue to take a long-term approach – going beyond immediate health crisis concerns - by addressing structural issues related to gender equality, including unpacking harmful social norms.
- Engage ministries of finance and economy, as well as chief economists, in designing gender-responsive financial recovery plans. Countries should also ensure means to assess how women and vulnerable segments of society are affected by access, or lack thereof, to recovery and stimulus packages, and should take into consideration the implications for those populations.
- As quickly as possible - and at the outset of crisis response efforts - ensure engagement with, and support and funding for, local women's rights organisations and women's groups and movements that are working to support women and respond to the crisis.
- Prioritise women's economic and political empowerment and leadership, and redouble efforts to recognise, reduce, and redistribute unpaid care work - including for the most vulnerable women and girls such as those with no access to information, digital and communication technologies – with the aim of easing the out-sized burden of care on women and girls in the COVID-19 crisis.
- Ensure continued access for women and girls to basic services, including health, education, and employment. Donors need to ensure that aid commitments to education remain stable or increase - and focus on the most at risk, including children in emergency situations and disadvantaged girls.
- Develop key principles and guidance on approaches to gender equality and women's empowerment for development agencies, ministries of foreign affairs, and other parts of government. Members can build on recent standards such as the *DAC Recommendation on Ending Sexual Exploitation, Abuse and Harassment in Development Co-operation and Humanitarian Assistance* – as they keep up progress to improve systems to prevent, respond to, and eliminate SEAH with partners across the aid ecosystem.
- Review and adjust policies and practices in development that lack a gender lens – while recognising the mounting backlash against gender equality and against fundamental human rights such as non-discrimination.
- Design programmes tailored to context with politically informed approaches that can address employment challenges, loss of livelihoods, and shore up social protection. This includes a more systematic uptake of gender equality analysis and inclusion of gender equality in other analytical tools used; as well as collecting more sex-disaggregated data to analyse the effects of policies and programmes on women, taking into account other intersectional inequalities in the COVID-19 recovery phase.
- Continue to work on raising the standards and developing principles for effective policies and practices on gender equality and development co-operation working across governments, with partners, and including through collective action in the DAC Network on Gender Equality.



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Notes

¹ See [DAC Recommendation on Ending Sexual Exploitation, Abuse, and Harassment in Development Co-operation and Humanitarian Assistance: Key Pillars of Prevention and Response](#) (OECD, 2019^[26]), [OECD Recommendation on Gender Equality in Public Life](#) (OECD, 2016^[36]); and [2013 OECD Recommendation of the Council on Gender Equality in Education, Employment and Entrepreneurship](#) (OECD, 2013^[35])

² DAC members replies to a questionnaire and during a meeting, in May-June 2020.

³ DAC members replies to a questionnaire and during a meeting, in May-June 2020.

⁴ The OECD definition of blended finance is “the strategic use of development finance for the mobilisation of additional finance towards sustainable development¹ in developing countries”, with ‘additional finance’ referring primarily to commercial finance.

⁵ Only 47% of the private flows mobilised were screened against the DAC gender equality policy marker.

⁶ Other official flows (OOF) are defined as official sector transactions that do not meet ODA criteria. OOF include: grants to developing countries for representational or essentially commercial purposes; official bilateral transactions intended to promote development but having a grant element of less than 25%; and, official bilateral transactions, whatever their grant element, that are primarily export-facilitating in purpose.

⁷ Only 20 DAC members report their OOFs. Moreover, only 32% of their OOFs were screened against the DAC gender equality policy marker.

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