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Gender-related impacts of COVID-19 in African LDCs

Abstract

This paper examined the gender related effects of COVID-19 on African LDCs. The trends shows that unemployment in African LDCs almost doubled from 6.97 per cent in 2019 to 11.55 per cent in 2020. Women are disproportionately affected due to their overrepresentation in informal employment across sectors. The negative impacts are compounded by existing gender inequalities within the labour market and lack of social security support. Limited fiscal space of the LDCs as most of them are not able to extend the required support to most vulnerable individuals and businesses in the informal economy, of which more than 50 per cent are owned by women, dims the odds of their recovery post-COVID-19. Mitigating job and income losses through redistribution mechanisms or social protection policies that enhance equality remains the most viable policy option in the short run to enhance recovery. In the long term, increased gender parity, strengthening social welfare systems whilst ensuring financial inclusion of the informal sector and closing the digital divide between gender and income groups will go a long way in enhancing recovery and build economic resilience to future pandemics.

Key words: Covid-19, African LDCs, gender

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Introduction

As countries continue to enhance measures for containing the further spread of COVID-19, the economic fallout continues to have differential impacts on men and women. While this impact is not homogenous across countries and regions, for most countries, the salient factors determining the nature and depth of these gendered impacts mainly lie with the labour market due to its direct impact on incomes and livelihoods. Women's vulnerabilities to COVID-19 heavily rest on existing gender inequalities across social and economic spaces, which have resulted in low and stagnant female labour participation rates and over-representation of women in sectors that were more vulnerable to COVID-19. Madgavkar et al., (2020) estimate that women's jobs are 1.8 times more vulnerable to COVID-19 related impacts than men's jobs mainly due to existing gender inequalities. Whilst equally pinning increased vulnerability of women's jobs to COVID-19 on existing gender inequalities, Alon et al. (2020) further contends that women's jobs were disproportionately affected due to their overrepresentation in sectors that were more vulnerable to COVID-19, such as restaurants and hospitality livelihoods in the service sector. These findings are further compounded by persistent informality in African LDCs, which accounts for more than 90 per cent of women's jobs on average (figure 2).

Gondwe (2020) and UNCTAD (2021) suggest that the partial or full lockdown measures that most governments imposed to contain the spread of the virus had a big impact on the most vulnerable groups in Africa, whose incomes and livelihoods are contingent on informal employment. While government social welfare systems are functional in most countries in Europe, Asia and America¹, the social welfare systems in African least developed countries (LDCs) are too weak or non-existent to effectively support the economic fall out of the most vulnerable businesses and livelihoods. Informal employment remains the most vulnerable to COVID-19 related impacts, as it is not subjected to labour legislation or income tax, and it is not appended to any social protection and employment benefits (OECD and ILO, 2019). In Africa, the informal sector is generally characterised by low incomes with a large proportion of daily wage earners, and poor working conditions, which further increases the vulnerability of the workers to the social and economic shocks of COVID-19 (Daniel et al., 2020). Although informal employment is a source of income for 63 per cent of men and 58 per cent of women at the global level, it is a source of income for 93.9 per cent of the female workforce in African LDCs and 87.8 per cent of the male (ILO, 2018), suggesting increased vulnerability to the impacts of COVID-19 for more women than men in the region, which is further compounded by existing gender inequalities. Arbache et al. (2010) highlight the multidimensionality of gender disparities in the African labour market, concluding that the size and governance of labour markets is the key determinant of gaps between gender. Limited job creation forces individuals with higher human capital to acquire more employment in formal sectors, thereby widening income gaps. Egas (2021)² shows that 92.3 per cent of the non-agricultural informal work is done by women predominantly with low education. Similarly, in Madagascar, education is found to have a strong positive correlation with the probability of paid employment, although self-employment is preferred in the informal sector (Nordman et al., 2010).

Against this backdrop, this paper assesses the gender-related impacts of COVID-19 in African LDCs, focusing on the informal sector to expose the structural issues that demand consideration. Due to its role in supporting incomes and livelihoods of the most vulnerable to COVID-19 social and economic impacts, the informal sector is crucial to understanding the depth of short-term gender-related impacts, and the consequent path of mitigating negative economic impacts that undermine progress towards the Sustainable Development Goals (SDGs). Through its negative impact on incomes, livelihoods and economic growth, the pandemic has reduced prospects of LDC graduation and the 2030 SDG Agenda progress for many countries. The paper relies on the analysis of trends to explain the underlying patterns of key variables to analyse the diversity of impacts from the pandemic, and effectively inform policy in enhancing recovery and building strong economies post COVID-19.

¹ America in this paper is as classified by the *European Centre for Disease Prevention and Control*

² Egas D (2021). The gendered impacts of COVID-19 in Mozambique: Challenges and way forward, International Growth Centre, available at: <https://www.theigc.org/blog/the-gendered-impacts-of-covid-19-in-mozambique-challenges-and-way-forward/>

1. General impacts of COVID-19 in Africa

With 8, 468, 345 confirmed cases (ECDC stats, October 2021)³, the African continent is still on its recovery path after being hit by the coronavirus pandemic that has taken the lives of thousands. In particular, COVID-19 has threatened the growth of many African LDCs by exacerbating existing gender inequalities and vulnerabilities within country ecosystems. Although the continent reported fewer deaths (216,840) compared to Asia (1,072,213), the Americas (2,282,980) and Europe (1,379,920)⁴, the effect of the pandemic is not homogenous across countries and sex. For instance, in April 2020, Sudan and Mauritania had higher death rates compared to the Organisation for Economic Co-operation and Development's (OECD) countries, reporting deaths at 15.63 per cent and 14.29 per cent, respectively (Bhattacharya and Islam, 2020).

Women in particular have been disproportionately affected by the pandemic, which has exacerbated existing vulnerabilities and gender disparities in key sectors. Border closures and social distancing measures have exposed gender-related risks of economic shocks, as they adversely affect economic activities and incomes. Anecdotal and statistical evidence suggests that the pandemic has halted years of gender equality progress, increased female poverty and forced women to bear the socio-economic burden of the pandemic through gender-based violence, unpaid care work and job insecurity, among others. This section discusses COVID-19 impacts on the health and education sectors, highlighting the factors that increased the vulnerability of women to the pandemic across these sectors. Lastly, with foreign trade linkages as the main channel for COVID-19 economic impacts in African LDCs, the section will also discuss the extent to which restrictive COVID-19 movement measures affected informal cross border trade, particularly as it pertains to the relative vulnerability of women's incomes and livelihoods.

1.1 The impact of COVID-19 on the health sector in African LDCs

The pandemic directly hit health systems in many African LDCs, exposing their limited capacity to combat such a crisis. Health systems were proved weak, as equipment, workforce capacity and data management were inadequate, largely due to the low levels of existing investment in the sector. For example, Angola and Sao Tome and Principe have 0.8 and 2.9 hospital beds, respectively, per 1,000 people (WTO and EIF, 2020). Ethiopia has 557 ventilators, which translates to 194,099 people per 1 ventilator. The ventilator density is even lower for other countries that have less than 10 ventilators, such as the Democratic Republic of the Congo, Mali, and Madagascar, where 1 ventilator serves about 20 million, 6.5 million and 4.5 million people, respectively.⁵ Similarly, most African LDCs have very few functional intensive care units (ICUs), which is another critical element for effectively fighting the pandemic.

However, cognisant of the fragility of these weak health systems in coping with significant increases in the demand for hospitalized care, most African LDCs quickly leveraged local innovations and resilience gained from previous pandemics to contain the spread of the virus and manage its related health impacts. Coupled with generally low infection rates, the direct health impact from the pandemic in most African LDCs was mild, compared to other African countries (figure 1). Overall, Africa accounted for only about 4 per cent of the global cases⁶, which were unevenly spread across the continent, and largely skewed towards South Africa (2,919.6 cases per 1,000 population) and a few other countries in the north (Egypt, Libya, Morocco and Tunisia), with cases ranging from 324.6 to 944.3 per 1,000 population (figure 1). Although Ethiopia is one of the few countries in the LDCs group that had a high number of cases (362) and deaths (6.4 per 1,000 population), figure 1 shows that most African LDCs recorded less than 40 cases and 2 or fewer deaths per 1,000 population, while more than 14 deaths per 1,000 population were recorded in some of the non-African LDCs, including South Africa (88.9), Tunisia (25.1), Egypt (18.3) and Morocco (14.6).

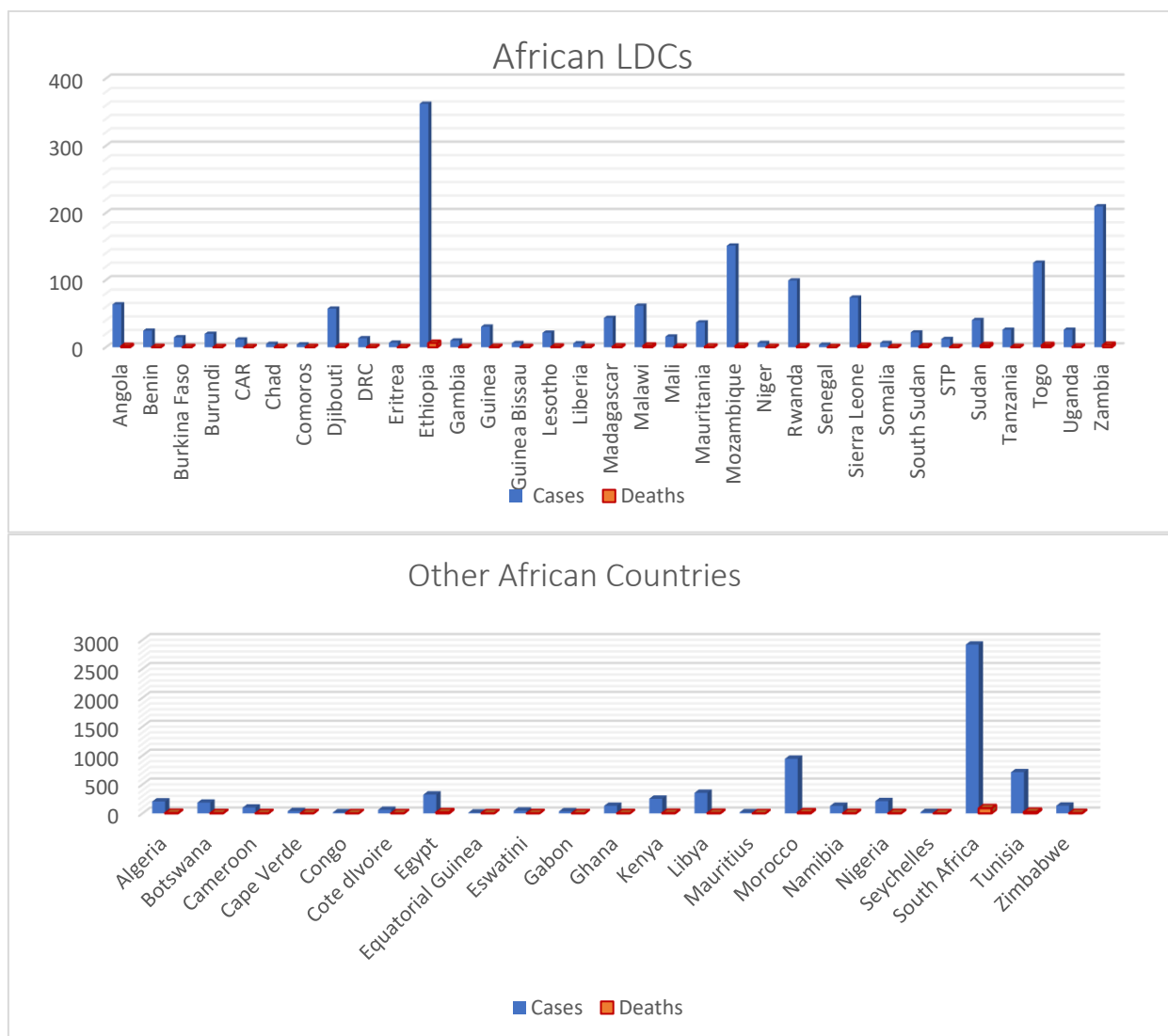
³ European Centre for Disease Prevention and Control (2021). COVID-19 situation update worldwide, as of week 42(updated 28 October).

⁴ Ibid.

⁵ Mo Ibrahim Foundation (2021). *2021 Forum Report: COVID-19 in Africa. One Year On: Impacts and Prospects*. Available at: [2021-forum-report.pdf](#)

⁶ Authors' calculations, based on ECDC stats (October, 2021)

Figure 1: Covid-19 cases and deaths per 1,000 population in Africa (as of 28th October 2021)



Source: ECDC COVID-19 data

Notes: Observe the difference in scale of the embedded charts; Sao Tome and Principe (STP), Central African Republic (CAR) and Democratic Republic of Congo (DRC)

The state of gender for the continent's health sector stands at 57 per cent of the workforce being women, of which only 28 per cent are doctors, revealing the extent of gender inequality at senior medical levels⁷. While this is lower than the global average of 40 per cent of female physicians, some African LDCs, such as Benin, Mozambique, Niger and Senegal, have maintained or are close to equal ratios of male to female doctors. Hay et al. (2019) found a significant correlation between gender norms and health systems, in that health systems reflect gender roles that underline gender inequalities in the health sector. They call for gender-focused policies and systematic evaluation of restrictive gender norms, beyond the pursuit of gender parity. For example, both Mozambique's Strategy for Gender Inclusion in the Health Sector 2018-2023⁸ and Senegal's 2015 Plan to Institutionalize Gender in the MSAS and Reinforce Gender Integration Capacity⁹ address issues hindering female healthcare workers, such as discrimination, being primary caretakers and gender norms prohibiting equal access to healthcare.

⁷International Women's Day 2021: Introduction | WHO | Regional Office for Africa .

⁸ UNDP Mozambique (2018). Strategy to provide gender sensitive health care (1 December).

⁹ Newman C (2018). "Senegal's New Roadmap for a Gender Transformative Human ResourceManagement Policy", IntraHealth International.

The United Nations Development Programme's (UNDP) analysis of socio-economic impacts of COVID-19 used the International Futures (IFs)¹⁰ tool as an integrated assessment modelling platform to model the effects of the pandemic in 10 African countries¹¹, 5 of which were LDCs (UND, 2021). Their results showed that government expenditure on health is a key determinant of the health sector's ability to mitigate shocks. In particular, countries with health investments below 2 per cent of the gross domestic product (GDP) experienced high levels of indirect mortality ratios following the direct effects of the pandemic. Currently, most governments have increased expenditures in health and public services as cases continue to rise. However, unequal resource allocations have shadowed other diseases affecting African LDCs, such as HIV/AIDS, tuberculosis and malaria, which are still the leading causes of death.

Additionally, the vulnerability of women residing in remote and rural areas has been amplified due to the shock in health provision services, on the backdrop of weak health systems, that have forced resources away from maternal care services. Limited access and use of maternal and newborn health (MNH) services have negative effects on women's health. The World Health Organization (WHO) estimates that a 10 per cent decrease in MNH service provisions could increase the number of maternal and newborn deaths by 28,000 and 168,000, respectively. Interruptions in family planning services, exacerbated by COVID-19 related school closures, led to a rise in teenage and unintended pregnancies by as much as 50 per cent in some African LDCs. For instance, while Malawi recorded a 35 per cent increase in teenage pregnancies for the first half of 2020 (Davies, 2020), teen pregnancies per month doubled in Uganda's Nwoya district between April and June 2020 (Edwards, 2020). Anecdotal evidence of a surge in job and income losses during the lockdowns propelled many into poverty, which among other things, resulted in a surge in child marriages.¹²

The vulnerability of women in the region is generally compounded by the dual role they play as workers (both formal and informal work) and primary caretakers. The higher the need for childcare, the lower the "ability" to work, as conditions of work during the crisis are not protective of women who are in "critical occupations", such as healthcare workers or for those who have to telecommute. Bhattacharya and Islam (2020) show that the human health and social work sectors have a high share of female employment – approximately 70 per cent – suggesting that their exposure to economic shocks leading to income losses is higher than that of men. Overall, the COVID-19 pandemic has altered the state of the health sector. Many African countries report positive efforts to better health infrastructure, policy and coverage, as reinforcement of health systems have become a development priority. A study from the University of Nigeria recommends that the provision of peer-review mechanisms to ensure a coherent increase in health financing across Africa and that gains from stronger health systems are attained (Uwaezuoke, 2020). Such gains include universal health coverage, health worker capacity building, and hygiene. Also, it can be argued that a segment of health is a "new winner" of the pandemic – domestic manufacturing. Increased production of sanitisers, masks and other preventative products is commendable.

The impact of COVID-19 on the education sector in African LDCs

Whilst COVID-19 has challenged the health sector, education is another sector that experienced high impact and slow recovery from the pandemic. The education sector also employs more women than men, making women more vulnerable to measures imposed to mitigate the pandemic (Bhattacharya and Islam, 2020). COVID-19 containment and social distancing measures, compounded by existing gender stereotypes in the sector, disproportionately affected women's jobs and livelihoods. For example, in most African LDCs, for women that are both primary childcare givers and employed/self-employed, childcare facilities and school closures meant double shifts, as children were home full-time, needing support on their schoolwork. It is important to note that this is not an isolated case for African LDCs women, as they tend to be overrepresented in sectors with stability, such as education and healthcare, and mostly cover the majority of low or unpaid care labour.

¹⁰ The IFs tool is an integrated modelling platform covering 12 core systems (agriculture, demographics, economics, education, energy, environment, government finance, governance, health, infrastructure, international politics and technology) which facilitates forecasting for 186 countries (with flexible country groupings) through the SDG horizon of 2030 and 2100. The IFs modelling is backed by 3,500 historical data series from a very wide range of data sources.

¹¹ Angola, Cabo Verde, Chad, Democratic Republic of the Congo, Ethiopia, Kenya, Mali, Mauritius, Nigeria and South Africa.

¹² Welle D (2021). Africa: COVID lockdowns blamed for increase in teenage pregnancies. *The Indian Express*.

A total of 53 African countries closed their educational institutions by April 2020,¹³ highlighting the extent of decreased access to education for many children, especially those in rural areas where online learning was largely unfeasible. While short-term temporal closures were initially envisaged across the continent, the reality of successive waves of the pandemic forced several African countries to reclose after full or partial reopening. As such, most schools in Africa were closed for 3 to 6 months on average from March 2020 (Daniel et al., 2020; ADEA et al., 2021; and UNICEF, 2021). The World Bank estimates that Africa's human capital growth will be negative, as 2.6 million African girls are not expected to return to school¹⁴. The lack of remote learning facilities negatively impacted the sector by exposing the depth of socio-economic inequality across communities. Compounded with gendered stereotypes, research shows that girls were disproportionately affected.¹⁵

Perhaps the largest risk of lockdowns for women and girls is gender-based violence, child marriages and unintended pregnancies, as schools are “safe havens” against violence and household poverty. Anecdotal evidence from non-governmental and civil society organisations across the continent suggests that school closures have forced young girls to become income earners at home, reducing their chances of returning to school. Gender and cultural norms have not only limited access to education and increased the burden on women as they take on domestic activities but are also expected to reverse parity gains in educational attainment across genders. Nonetheless, COVID-19 has availed an opportunity for policy reform in the education sector, which had previously suffered from packed curriculums, unequipped teachers and affordability¹⁶. Notwithstanding affordability as a key source of digital technology exclusion across gender, lack of information and communications technology (ICT) skills¹⁷ and inherent biases in socio-cultural norms further limits the capacity of women and girls to meaningfully access and utilise digital technologies. Moreover, parental concerns about online safety and unwarranted exposure to content that is against their norms further limits online access and skill development for more girls than boys in most African LDCs. Underscoring these concerns, an online survey by Plan International shows that 59 per cent per cent of girls were abused or harassed online during the COVID-19 lockdown.¹⁸ Overall, research by UN Women highlights a 17 per cent global internet user gap, with fewer women than men having meaningful access, ownership and use of digital technologies.¹⁹ However, opportunities for improvements in education through digital technologies have been unveiled. A survey of 1,600 educators and technology professionals in Africa (by eLearning and the EdTech Hub) has revealed that they are optimistic about reform and innovation opportunities from COVID-19²⁰. The use of technology in education is seen as a key supporting mechanism for the sector. Nonetheless, growing digital divides and inhibiting inclusive access to technology are likely to slow down such innovation, as is the provision of tools and financial support to pursue such innovation.

1.2 Impact of COVID-19 on the education sector in African LDCs

While COVID-19 had a direct impact on health systems and public expenditures, the economic impact was mainly a consequence of the measures imposed to control its spread. In particular, the restrictive movement measures adversely affected trade and trade logistics, both from the supply and demand sides, following a general decline in economic activities across the globe. On the supply side, border closures and in-country lockdowns slowed down production and disrupted value chains across the globe, as the movement of both raw materials and final goods was heavily restricted mainly across borders. An overdependence on external markets and primary commodities prompted a reduced demand for African exports and resultant revenues. It is worth noting that at the core of Africa's international trade lies informal cross-border trade (ICBT), which accounts for up to 40 per cent per cent of intraregional trade in East and Southern Africa

¹³ Bissoonauth R (2020). “Addressing the impact of Covid-19 on girls and women's education in Africa”. Global Partnership for Education.

¹⁴ Murthi M, Ghanem H, Diagana O (2021). Why investing in women and girls matters now more than ever, World Bank blog.

¹⁵ Younglives.org.uk (2021). Addressing the gender digital divide is critical to ensure no one is left behind from COVID-19 | young-lives (younglives.org.uk)

¹⁶ *The Economist* (2021). Covid-19 creates a window for school reform in Africa | *The Economist*.

¹⁷ Amaro D, Pandolfelli L, Sanchez-Tapia I and Brossard M (2020). COVID-19 and education: The digital gender divide among adolescents in sub-Saharan Africa - Evidence for Action. unicef.org

¹⁸ Plan International (2020). Abuse and harassment driving girls off Facebook, Instagram and Twitter | *Plan International*.

¹⁹ Mlambo-Ngcuka P and Albrechtsen AB (2020). Op-ed: We cannot allow COVID-19 to reinforce the digital gender divide | *UN Women – Headquarters*.

²⁰ Stromeyer, R (2020). The Effect of Covid-19 on Education in Africa and its Implications for the Use of Technology — *International Council for Open and Distance Education (ICDE)*.

(ITC, 2008²¹; Nshimbe and Moyo, 2017). The central role of ICBT is even more prominent in African ALDCs, where most of the population sustain their livelihoods in the informal economy (figure 2). For example, Stuart (2020) estimates that the value of ICBT in Uganda corresponds to 86 per cent of its formal exports, while in Rwanda, it is pegged at 50 per cent higher than its formal exports.

ICBT thrives on a continuous inflow of commercial goods, which was largely impaired by COVID-19 restrictions on movement and border closures. While undermining the demand for most businesses, these measures resulted in the delayed circulation of goods, and in extreme cases, complete supply cut-off, as transport and logistics were greatly affected by the imposed containment measures. Although the complete movement of goods across borders was largely minimized in Africa, increased border regulations to facilitate such movements were not conducive for informal cross-border traders, resulting in increased use of unofficial routes to trade across borders (Mvunga and Kunaka, 2021). However, these routes are costly for small-scale traders, as they involve the illegal crossing of borders, smuggling, corruption and risk of theft or confiscation of their merchandise. While formal routes remained the optimal option, strict routine checks made it virtually impossible for most of these traders to not declare their goods and pay appropriate tax, which under their normal trading arrangements, is not part of their costs. Moreover, these strict routine checks further compounded the long border-crossing times, that drive traders to avoid official import or export declarations (Karkare et al., 2021; Mihigo and Mesa, 2021).

As the movement of large consignments in vehicles was largely feasible under strict clearance protocols, group purchases of merchandise by small traders were encouraged (Mihigo and Mesa, 2021; Mvunga and Kunaka, 2021). However, this excluded most of the ICB traders with low working capital and thus, further minimizing their chances of remaining in business, particularly for those that rely on daily buying and selling. Reduced demand following restrictions on movement further resulted in huge losses, impaired their ability to repay the loans, and jeopardizes the complete loss of their livelihoods. While most formal businesses shifted to online trading, low levels of education and limited access to digital equipment prevented informal businesses from adapting quickly to the changing market conditions (Chivunga and Tempest 2021). Moreover, the very nature of ICBT, which is largely on a cash basis, casts doubt on the applicability of the digital revolution in international trade dominated by ICB traders.

Largely trading in raw or semi-processed agricultural products, women constitute up to 70 per cent of the informal cross-border (ICB) traders in Africa,²² of which about 90 per cent have no alternative source of livelihoods (Bugingo, 2018). Overall, ICB traders in Africa have predominantly low working capital and limited access to finance, as most of the businesses are for subsistence and without tangible business assets to be used as collateral for business loans. Moreover, most ICB traders are unbanked and rely on expensive informal loans for bulk stock purchases (mostly targeted to be sold within the day, as they do not have appropriate storage for perishable goods). Research shows that while women's businesses are largely on a small scale with and for subsistence, men's businesses are on a somewhat larger scale and trade in higher-value products (USAID, 2016), suggesting increased vulnerability of women's businesses to COVID-19 related interruptions. Accordingly, a policy brief by UN Women et al.²³ highlights that most female-led small and medium-sized enterprises (SMEs) in Africa are more at risk of permanent business shutdown than men.

2. Policy responses to COVID-19 in African ALDCs

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