

**UNDP COVID-19 RESPONSE** 

# **GUIDE: How to Integrate Gender into Socio-Economic Assessments**



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The COVID-19 crisis is affecting everyone, but women and girls are being differently impacted and could face disproportionate economic, health and social risks.

These gender-differentiated socio-economic risks must be recognized for an effective COVID-19 response and recovery.

This in-depth checklist can be used to guide UNDP Country Offices, UN sister agencies, countries and other partners to ensure that key gender equality considerations are taken into account when conducting a Social and Economic Impact Assessment and Response. The checklist can be applied to both the on-going emergency and post-emergency COVID-19 scenarios.





## Framing Gender-Responsive COVID-19 Impact Assessment

# The terms of reference for impact assessment teams should include the following:

- Compliance with this guide as a core responsibility of the impact assessment team.
- Gender balance and a gender and socio-economic impact assessment expert.
- A team leader at least familiar with gender equality in impact assessment.

## The scope of COVID-19 impact assessments should consider:

- The direct and indirect impacts of the COVID-19 crisis on living conditions, livelihoods, autonomy and decision-making for women and girls, men and boys, with a focus on the gender gaps under each topic/sector.
- National and sub-national government strategies to respond to the pandemic.
- Opportunities for addressing gender gaps and scaling up women's empowerment in the policies and actions being developed to respond to the crisis, and the post-crisis recovery.

### Impact assessment methodologies should:

- Use quantitative and qualitative methods for data collection and analysis. Include key gender-specific indicators by area of assessment (a set of indicators is included in Annex 3).
- Disaggregate all quantitative indicators by sex, age and race/indigenous groups. Explore further disaggregation by geographical location, rural/urban settings, disability, gender identity, sexual orientation, religion, migrant status, nationality, level of education, household type, and other relevant categories.
- If possible, use geo-referencing methods in the deployment of the assessment.
- Disaggregate information by household composition (numbers of adults and children) with specific attention to households with children maintained by a single adult or child-headed households.
- Consider using rapid case study analysis when obtaining intra-household sexdisaggregated data is either difficult or impossible.
- Look at intra-household dynamics and the impacts on women, men, girls and boys, including distribution of consumption, control of income, shifts in power/decisionmaking, and gender-based violence (GBV).
- Ensure the methodology engages with gender equality mechanisms and civil society organizations, such as women's rights and feminist groups and community groups, particularly women's groups most impacted by the crisis (e.g. women working in the health care sector, domestic workers, migrant workers, etc).
- Use gender-responsive budgeting to analyse financial resource allocations to the COVID-19 response.
- Ensure the methodology complies with health policy responses, such as social distancing measures.

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## **Key Questions to Address in Socio-Economic Assessments**

#### **ECONOMIC ASSESSMENT**

### Employment, labour and income

- Based on the most recent labour force data, which sectors do women and men work in and what types of jobs are they doing (e.g. wage work, self-employment, unpaid contributing family workers)? This includes sectors such as health, travel, tourism, transport, entertainment, cleaning, paid domestic and care services, food service industries, agriculture and food processing. How has COVID-19 impacted these sectors?
- Using the methodologies described above, what is the impact on the labour market at the national and sub-national level, disaggregated by sex? This should consider labour force participation, employment/unemployment/underemployment, formal/ informal jobs, part-time/full-time work, seasonality, income (and control of it) and social protection (health care and pensions). How have stay-at-home and other social distancing measures affected both women's and men's jobs and income?
- What has been the effect on the unpaid caregiving burden in households? How is unpaid household labour distributed among family members? How is any change in the unpaid care burden affecting women's and men's ability to generate income through paid employment?
- What is the impact on the care sector and its workers (health care, social services, childcare, domestic workers)? Is any increase in demand being met? Are there measures (where social distancing is incompatible with the provision of certain services) that are putting care providers and recipients at greater risk?
- Are social norms and stereotypes having any impacts on women's and men's access to employment, livelihood opportunities, and other resources (e.g. technology) in the context of this crisis?
- What are the impacts of COVID-19 on the safety (including exposure to violence and exploitation) of workers with increased risks? This includes migrants, workers living with their employers, sex workers, homeless workers, street vendors, and frontline workers.
- Has the government or the private sector taken action to promote workers' well-being during confinement? Do these strategies address GBV, support for work-life balance and family care of dependents?
- What are the government social protection measures (e.g. health care, income support and job access) in response to the COVID-19 crisis? Are they equally accessible by men and women? Do they consider the specific constraints women face to maintain their jobs and income in the context of the crisis?

- Is the government strengthening the provision of social care support (e.g. childcare, support for elderly people and people with disabilities) to mitigate the increase in unpaid care? Are conditional cash transfers, such as those linked to children's schooling, among others, adapted to the current situation? Are the stimulus packages considering the extra time burden of unpaid work put mostly on women and taking measures accordingly?
- Have the employment support policies promoted for the private sector been extended to informal workers, migrant workers and paid domestic workers? Will the employment support policies have a positive or negative effect on the employment gender gap (e.g. stimulating sectors mostly occupied by women, promoting part-time employment, improving/worsening employment conditions, etc.)?
- Do the employment and income support policies in response to COVID-19 address the gender gaps in the use of information and communication technologies? Or gender gaps in earnings and access to finance and financial services?

### **Enterprises and value** chains

- What is the distribution of micro, small and medium enterprises (MSMEs) and women-owned businesses by sector and how have those sectors been affected by COVID-19?
- What has been the impact in terms of turnover, revenue and survival of formal and informal MSMEs due to the COVID-19 crisis? What are the differential impacts for women-owned businesses?
- What changes have enterprises put in place in response to the pandemic? For businesses that have been forced to close due to stay-at-home and social distancing policies, what measures have the owners taken?
- Have women-owned enterprises, particularly micro and small enterprises, been able to access COVID-19 programs for the private sector (e.g. advice, finance, guarantees, etc.)? Do government programs address the specific challenges of women entrepreneurs and self-employed women? What obstacles do they face?
- Have government support programs been formulated with the participation of women entrepreneurs and women's business associations or related organizations?
- Are pre-existing gender inequalities in access to resources and markets including assets, financial services, credit, social capital, information networks, mobility, decision-making, and bargaining power with providers and clients being worsened by COVID-19? What are the different impacts on women- and men-owned MSMEs?
- Is the government deliberately addressing gender gaps and promoting women's empowerment in policies and initiatives supporting businesses, such as financial stimulus and relief measures and fiscal relief measures?



#### **SOCIAL ASSESSMENT**

#### **Direct social impacts**

- Have the immediate needs been met of women working in care sectors, including the health care sector, nursing homes and elder care facilities, domestic workers, and providers of care to the disabled? Have they had access to reliable and timely information, personal protective equipment and menstrual hygiene and reproductive health products?
- How are COVID-19 cases distributed among women and girls, and men and boys (by age groups, with disabilities, and by race/ethnic groups)? How are cases distributed among workers in care sectors?
- How has income been affected for low- and medium-income households because of the COVID-19 crisis (by household type)? Has this effect been different for women and men within the household?
- How have stay-at-home measures prevented women and men from carrying out subsistence activities such as agriculture and livestock and obtaining essential resources for their families, including water, firewood and natural food resources. Is there any difference between women and men in their mobility patterns?
- Has the provision of services such as water, electricity and gas to families, particularly for low-income families, been affected by the crisis? Has the provision of other services to guarantee digital and internet connectivity and/or teleworking been affected? Has the reduced income prevented low-income families from being able to pay their bills for essential services?
- How are the living conditions (such as overcrowding, restricted access to open spaces, lack of sufficient natural light, scarcity of hygiene facilities, etc.) affecting households' abilities to prevent COVID-19 infections and comply with stay-at-home and other social distancing measures?
- Has GBV, including rape, sexual assault and female genital mutilation, against women and girls increased during the COVID-19 crisis? This can be assessed by examining a femicide index, GBV reports, calls to GBV hot lines, GBV victims visiting hospital emergency rooms, police interventions etc.
- Have there been changes in household composition in response to the crisis, such as increases in separation, divorces or abandonment by mothers or fathers? How have such situations affected the welfare of households?
- Has there been an increase in adolescent pregnancy or early marriage during the crisis? If so, what are the reasons for this rise (e.g. the reallocation of health resources to COVID-19, less access to contraceptives due to stay-at-home measures, increased intra-family sexual abuse, etc.)?
- Has access to reproductive health services or perinatal maternal mortality been impacted the by COVID-19 crisis?
- What has been the impact on the education of girls, boys and adolescents because of the COVID-19 crisis, including absenteeism, drop-outs, and performance? How has the closure of schools affected girls' and boys' nutrition during and after the confinement?
- Are there any accountability mechanisms for security personnel, the police and military when implementing emergency measures? Do they take the differentiated impacts on women and men into consideration?

#### **Direct social impacts**

Are women and girls being included in community-level decision-making processes and governance structures that shape COVID-19 response strategies? What is the sex distribution among COVID-19 decision-making bodies at the different levels? Are gender experts involved in the decision-making of COVID-19 emergency and post-emergency strategies? Have the emergency and post emergency strategies considered key gender issues in each sector of intervention?

## Intra-household dynamics

- Have the power dynamics changed in the household, particularly women's bargaining capacity, role in decision-making, and control over resources?
- How have the stay-at-home measures affected households' abilities to meet their basic needs such as access to food, water and hygiene? What specific measures have households taken to meet their basic needs, according to their socio-economic level?
- Have the basic consumption practices of households changed during and post confinement, including distribution of consumption among household members? What are the specific impacts on girls and boys, women and the elderly? For example, school withdrawals of girls to prioritize boys' education, reducing the intake of food of women or girls, or sacrificing essential medicines.
- Have workloads increased to obtain or produce food and to secure essential needs such as water? How are these responsibilities distributed among family members? How does it affect women and girls?
- Is information about government response measures accessible and available to all household members?
- Have the responsible institutions strengthened the provision of GBV and sexual violence survivor-centered referral systems and services during and post confinement? Have these systems provided timely and adequate support to victims? To what extent could cases of GBV go unreported due to lack of referral mechanisms, limited economic capacities of the victim to escape, or increased control of the victim by the perpetrator because of stay-at-home measures, among others?



#### TARGETING THE MOST VULNERABLE GROUPS

Focus groups and case studies can be effective tools to assess the impact on groups most vulnerable to socio-economic effects of the COVID-19 crisis. In performing an assessment, these questions should be asked in addition to the ones described above. Please comply with social distancing and other safety measures when conducting such focus groups and case studies.

## Indigenous and rural populations

Are indigenous and rural livelihoods being affected by the COVID-19 crisis? How is social distancing impacting traditional practices and community structures? Are the crisis and post-crisis policies and programmes affecting the use of the land and access to productive means and resources for women and men? Do indigenous and rural communities have access to adequate health services, such as COVID-19 testing, health attention, and tele-medicine? Has the government put in place specific measures to address COVID-19 impacts in indigenous communities?

#### **LGBTI** persons

Are LGBTI persons being prevented from accessing health care and social support due to discrimination?

#### **Domestic workers**

How has the demand for domestic workers been affected? Has their freedom of movement, labour and living conditions, workload and labour safety been undermined? Do they have adequate protection against COVID-19 in their workplaces? Has their income security been affected from employers delaying, reducing or denying their salaries? Has their vulnerability increased due to sexual harassment and GBV? Has the government response adequately incorporated these concerns?

## Refugees and internally displaced persons (IDPs)

What is the impact of precarious living conditions and overcrowding on their vulnerability to the infection and their ability to access adequate health care? Have women refugees and IDPs in shelters been exposed to sexual violence and other GBV-related situations? Has the government put in place specific measures to address these impacts?

#### Persons with disabilities

■ Do persons with disabilities have equal access to social services and health care given the reallocation of health resources to COVID-19? Are there differences between disabled women and men with regard to the crisis? Has their vulnerability to GBV increased due to social isolation measures? Have emergency policies and plans considered the specific people with disabilities, particularly women.

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