Guidance Note to Country Offices and Programme Presence Offices

Gender Responsive Prevention and Management of COVID-19 in West and Central Africa
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“Globally, women make up 70 per cent of frontline workers in the health and social sector, like nurses, midwives, cleaners and laundry workers. We need mitigation strategies that specifically target both the health and economic impacts of the COVID-19 outbreak on women and that support and build women’s resilience, as we saw in Liberia and elsewhere. And to make those responses as well designed as possible, women should be fully engaged in their creation, be priority recipients of aid, and partners in building the longer-term solutions.”

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Gender Responsive Prevention and Management of COVID-19 in West and Central Africa

The coronavirus pandemic (also known as COVID-19) has now spread to all the 25 countries in West and Central Africa (WCA). This rapid evolution of COVID-19 in Africa is deeply worrisome. The coronavirus is a threat to the world and to all countries of our region, many of whom just recovered from the Ebola pandemic (such as Democratic Republic of Congo, Sierra Leone and Liberia). The region was already fragilized by conflict, violent extremism, and a very alarming humanitarian situation. The pandemic risks to be graver in refugee camps and IDPs camps in conflict or post-conflict areas.

It will also have an impact on the electoral calendar of the region. At least 7 countries in the region were planning elections during the second semester of 2020 such as Niger, Burkina Faso, Mali, Liberia, Cote d’Ivoire, Ghana, and Central African Republic (CAR). The revision of electoral calendar risks causing political tension and conflicts. The global and regional economic slowdown caused by the pandemic will threaten the gains achieved over the last few decades and deeply affect the future achievements of the SDGs.

While the first cases were imported, and started in towns, there are now many cases at the community level and efforts are being invested in preventing the spread of COVID-19 to avoid the worst. Physical distancing and confinement measures are being adopted in many countries as a norm. Unfortunately, this will have a negative impact on the population, particularly women who are already living in poverty without formal jobs.

In Sub-Saharan Africa, 74% of women in non-agricultural jobs are in the informal sector². Working in the informal sector without any social protection or insurance, will push them to continue to take high risks during the pandemic to be able to meet their families’ basic needs. Not to mention the fact that most of them earn a daily revenue and have no savings.

It is already anticipated that the economic impact of COVID-19 on this group of women will be very dire and they run the risk of not being able to benefit from post COVID-19 recovery programs.
In Asia and Europe, it has been proven that social isolation and confinement increase the risk of domestic abuse. This is because women in violent relationships are stuck at home and exposed to their abusers for longer periods of time and the usual services assisting survivors of violence are not operating at the same level as before. There is a large need for sex-disaggregated data to fully understand how women and men are affected by the virus. Not only for infection rates, but also economic impacts, the distribution of care work, and the extent of domestic violence.

Women and girls face differentiated impacts, but they also offer specific capacities, strengths, and leadership skills that are crucial in providing an effective response. At the frontline of the coronavirus pandemic are the healthcare workers, who are working around the clock and putting themselves at risk to care for patients. Around 70% of these healthcare workers are women.

In many countries, women’s organizations have already started initiatives to mobilize communities to help prevent the spread of the pandemic and to aid the most vulnerable families affected by confinement measures. Some women volunteers are helping in the production of masks and distribution of hand sanitizers.

UN Women’s role is critical in ensuring that this crisis does not fragilize women and in directing efforts towards reducing the impact on women. This stands for women across different social, economic and political strata including young women, women in rural areas, women living with disabilities, etc.

UN Women has therefore developed a global program on COVID-19, while the WCA Regional Office (WCARO) has also developed a regional concept note aligned with the action plan for West and Central Africa. This guidance note is for UN Women staff and contains advice on how to strategically adopt COVID-19 responses that are adapted to the specific context of the region. The guidance note proposes strategic interventions in the areas of coordination, resource mobilization, communication and community mobilization, elimination of violence against women, and women’s economic empowerment and economic recovery.

All UN Women Country Offices and Programme Presences are encouraged to review their programs, reprioritize focusing on those that are more relevant in the context of the crisis, postponing those that are not, and adapting others to make them relevant to the new situation. This guidance note can be used to inform such exercises.

Photo: KB Mpofu / ILO
II. STRATEGIC INTERVENTIONS TO PRIORITISE UN WOMEN AND GENDER

COORDINATION

UN Women has the mandate to lead, promote, and coordinate efforts to advance the full realization of women’s realization of women’s rights and opportunities.

In the COVID-19 framework, UN Women has a fundamental role in coordinating advocacy efforts and in the provision of technical expertise to policymakers and partners. This is to ensure that their responses consider the different experiences faced by women and men during a pandemic and that different social categories get the assistance they need most per the principle of Leaving No One Behind. The entry point to play this role is through different coordination set-ups, such as governmental mechanisms and UN mechanisms (UNCTs, HCTs, humanitarian clusters, thematic groups on gender and other areas, working groups, etc.).

The following strategies are advised:

• Based on the country level preparedness and response plan, engage with WHO to assess the required support from UN Women and the broader humanitarian community.

• Ensure that gender coordination mechanisms are in place at the country level (e.g. gender theme or working groups among partners) to promote gender mainstreaming in national COVID-19 response plans and advocate for the respect of the rights of girls and women. Lead initiatives within these mechanisms aiming to engender the response to COVID-19, such as: develop key messages and awareness raising on Impact of crises on gender inequalities for UNCT/HCT.

• Fully integrate within the COVID-19 coordination structure at the country level (UNCT and humanitarian sub-working group). Even in countries where UN Women is not a member of HCT, it is advised to continue to participate in sub-working groups and to take a leading role where possible. If there are many sub-working groups and UN Women does not have the capacity to participate in all of them, select the most strategic ones per the domains for which UN Women has a comparative advantage, particularly coordination, community response and recovery, protection and recovery.

• Ensure the engagement of gender actors, women-led organizations, women’s groups and networks in the coordination mechanisms by connecting them to the coordination bodies, and communicate agreed ‘offer to support’ from gender actors to the coordination bodies.

• Assign the staff members who will be mainly focusing their work on COVID-19 and set-up an internal task force on COVID-19, including all programme officers, under the leadership of the Country Rep or the Deputy Rep.
• Elaborate an Action Plan of the UN Women Country Office or Programme Presence with specific activities the CO/PP is intended to implement in the framework of the COVID-19 emergency in its country to engender its response, prevention, and containment. The Action Plan will be progressively adapted to the evolution of the context and spread of COVID-19 in the country.

• Ensure UN Women’s contribution to the elaboration of all planning documents to guarantee that they are gender-responsive and consider women’s and girls’ needs and specificities.

• Advocate with key partners and/or through the Gender Thematic Group or equivalent, to jointly carry out country-specific evidence-based analysis to help national entities and the humanitarian community better understand and address the gendered considerations and elements of the outbreak. This implies funds mobilization for the collection of sex-disaggregated data and the design of gender-sensitive data collection tools to ensure assessments capture differential impacts of the crisis on women and girls.

• Strengthen the capacity of UN Women and other humanitarian actors on gender sensitive areas in emergency (such as GBV, domestic violence, etc.) through webinars.

• Align in-country planning and implementation with the global program developed by UN Women HQ and with country specific program or action plans developed by the government and the UN system on COVID-19. UN Women’s program has adopted the LEAP approaches with the following priorities: coordination, protection of women against GBV, social mobilization and women’s participation, economic assistance.

• Share knowledge on gender and COVID-19 with GTG members and different partners at country level.

• Map interventions addressing an engendered response to COVID-19 in the country (the tool will be provided soon) through the GTG and/or other networks.

• Advocate for disaggregating data related to the outbreak by sex, age, and disability. Data related to outbreaks and the implementation of the emergency response must be disaggregated and analyzed accordingly to understand the gendered differences in exposure and treatment and to design differential preventive measures.

• Strengthen the leadership and meaningful participation of women and girls in all decision-making processes in addressing the COVID-19 outbreak.

• Share and update information on gender related COVID 19 issues with the Regional Office on a constant basis.
RESOURCE MOBILISATION

Humanitarian partners and UN Women were not prepared for such a disease and the drastic measures which need to be taken (quarantine, confinement ...). In addition, UN Women does not have a specific budget for this humanitarian emergency. Therefore, rapid efforts are needed to mobilize resources for interventions on COVID-19.

Many initiatives are going on at HQ, regional and country levels, to mobilize resources: a global program has been developed and HQ plans to contact 20 donors and all resources mobilized by HQ and WCARO will be channeled to the field. However, Country offices are encouraged to:

- Mobilize some internal resources (on core and program budgets), start with some catalytic activities and continue to contact potential donors
- Participate in the development of UN joint programs on COVID-19, making sure these programs are grounded in sound gender analyses, consider gendered roles, risks, responsibilities, and social norms, and account for the capabilities and needs of men as well as women
- Contact donors to request if some budget lines can be re-allocated to COVID-19 response
- Develop a COVID-19 concept note to be shared with donors
- Develop joint proposals to be submitted to the CERF fund
- Inform donors that all funding proposals from part of UN Agencies and INGOs must contain comprehensive gender analyses and protect mainstream provisions.

COMMUNICATION & COMMUNITY MOBILISATION

African countries and different partners are currently investing in containing the spread of the pandemic by strengthening medical response and adopting social distancing measures. But communication on the risks of COVID-19 and community engagement are key in this fight. Prevention messages must be contextualized for each country and even tailored to the context of specific social categories. They need to reach the maximum population, including the most marginalized and vulnerable groups (youth, women, IDPs, refugees...). Unfortunately, some usual communication approaches such as mass mobilization, trainings, etc. will not be applicable due to confinement. UN Women must be innovative and adopt relevant communication channels and tools. It is proposed to:

- Develop partnership with community radios for tailored sensitization messages in rural areas.
- Develop posters and banners for areas which will continue to be operational during this crisis: open markets, supermarket, hospitals and other essential services.
- Collaborate with youth and bloggers to produce adapted messages and to help with counter-messaging against false information on social media.
- Develop a partnership with communication companies to disseminate specific messages on women’s role in preventing the spread of COVID-19.
- Provide direct financial and technical support to local women’s organizations, including migrant women’s organizations and organizations of people with disabilities, to enable efforts to raise awareness within their communities.
• Make women’s stories visible through several storytelling actions, including inviting women to share their stories with us.

• Ensure that women can get information on how to prevent and respond to the epidemic in ways they can understand. Women play a major role as conduits of information in their communities. Typically, they have less access to information than men. Thus, reaching women and girls and educating them on the disease is crucial in tackling the spread.

ENDING VIOLENCE AGAINST WOMEN (EVAW)

Multiple forms of GBV are exacerbated within crisis contexts, placing women and girls at greater risk of exploitation and sexual violence. COVID-19 is likely to increase domestic violence rates and gender-based violence in public spaces. As government and non-government actors struggle to respond to the size and scope of the COVID-19 pandemic, overstretched health services will invariably divert resources away from essential services that women need. This includes pre- and post-natal health care and contraceptives and will exacerbate an existing lack of access to sexual and reproductive health services, gender based violence prevention and response services.

While focusing on response related efforts, UN Women’s approach will also focus on prevention aspects.

Prevention/information/communication

The COVID-19 pandemic has been accompanied by an “infodemic”, which has created mistrust and stigmatization, and increased the spread of misinformation. It is crucial to ensure that communities, particularly women, have access to trusted and accurate information about the measures and behaviors that mitigate the threat of the virus.

• Generate evidence and knowledge (Be a hub for information on EVAW and COVID-19) on the gendered impacts of the outbreak (media monitoring and analysis, rapid assessments, thematic specific surveys, etc.)

• Share critical resources, and help disseminate messages and guidance to UN agencies, partners, CSO, etc.

• Capture quantitative data on COVID-19 related GBV case in coordination with the overall data collection through the national coordination of GBViE through Women’s Ministries Support women’s CSOs as our core partners who may be especially struggling during this time.

• Assess how we can quickly provide support for CSOs to maintain their presence and work during this time through existing (and new) partnerships and funding.

• Take advantage of interagency coordination mechanisms to do joint advocacy and develop joint guidance on services.
Response

Vulnerable population segments will require life-saving violence response services:

- Life-saving care and support to GBV survivors (i.e. clinical management of psycho-social, mental health, and rape support) may be disrupted when health service providers are overburdened and preoccupied with handling COVID-19 cases

- Support GEWE Ministries on the national level response to ensure women and girls have access to services related to violence against women and girls (EVAWG)

- Identify new ways of reaching victims, as well as new mechanisms for reporting and accessing support, using not only innovation and technology but also community-based support networks

- Support or strengthen hotlines for reporting, and telephone/virtual based psychosocial support for survivors and men (with pre-trained professionals)

- Update Referral Pathways for COVID context.

WOMEN'S ECONOMIC EMPOWERMENT, ECONOMIC RESILIENCE, AND RECOVERY

The COVID-19 pandemic is having, and will continue to have, immediate impacts on the livelihoods of women and girls in West and Central Africa. Across the world, women are being rapidly affected by the economic slowdown as they are overrepresented in vulnerable employment and will be the first to lose their jobs. Women-led businesses, especially those small and micro, will see their operations most affected by disruptions in supply chains and closing of markets. Depending on the sector and level of measures taken by governments to contain the spread of the virus, they might be forced to stop their activity altogether. The already large burden of unpaid work, particularly in rural areas of West and Central Africa, is likely to increase for women because of increasing difficulties to provide food and water, as well as the need to care for the elderly and sick.

In addition to these effects, the size of the informal sector and the large proportion of women working informally in West and Central Africa, takes the gender impact of the crisis in the region to a different level. In the short term, confinement and mobility restrictions will affect daily wage workers and those working in the informal sector the most. Market women, cross-border traders, and other informal workers will be forced to continue their activity despite restrictions, contributing to further spreading the epidemic, unless they are provided with the necessary income replacement. This presents a serious challenge to policymakers. For example, keeping markets open is being given serious consideration by governments across the region as containment measures unfold.

UN Women Response at the Country Level:

- Income replacement mechanisms to vulnerable women. In the short term, the priority is to provide income support to women working in the informal economy and female headed households. Social protection mechanisms, such as unconditional cash or food transfers should be prioritized. As UN Women does not implement this type of intervention, it is critical that COs work with others that do (WFP, FAO, UNICEF, the World Bank, etc.) to ensure that these two groups are prioritized among recipients of transfers. UN Women COs should actively engage in the context of UNCTs and other country coordination mechanisms to ensure that income support targeting strategies include women informal workers and female headed households.
• Gender responsive economic recovery packages. As countries start deploying measures to mitigate the socio-economic impact of the crisis, it will be critical for UN Women COs to engage in the design of economic recovery packages to ensure that women needs are addressed. UN Women COs should reach out to the government early on to offer support and advice in the design of such packages. The RO is preparing a compilation of measures undertaken in other countries that can be used to inform dialogue and advice with authorities.

• Gender responsive budgeting analysis of COVID efforts. For countries with ongoing dialogue with the government or initiatives under implementation in Gender Responsive Budgeting, it would be critical to monitor the gender responsive use of national budgetary resources allocated to the COVID-19 effort. Particularly during the management of the crisis and most importantly, during the post-recovery/economic revitalization effort. This can take the form of targeted analysis (e.g. using consultants) which can later be leveraged for advocacy, together with women CSOs, to ensure that the post recovery effort considers the needs of women and girls.

• Joint socio-economic impact assessments of COVID. Joint impact assessments of COVID are taking or will take place at the country level. This will be the basis of future joint programming to implement recovery efforts and it is important that UN Women participates to ensure that gender is properly integrated and specific recommendations (leading to programming) are identified. UN Women can contribute with rapid (mostly digital) surveys of the crisis on women entrepreneurs, women-led businesses, female migrants, etc.

• Rethink and adapt standard Women’s Economic Empowerment (WEE) tools to mitigate the impact of the pandemic. For example:

  o Safe markets initiatives. Depending on the measures taken by different governments, if markets and other key economic infrastructure remain open, UN Women can advise governments on how to make them safe for use in the context of the pandemic. COs in WCARO can learn from experiences in India, UN Women’s work in Fiji, and adapt elements from UN Women’s ‘Safe Cities initiative’.

  o Digital platforms. Digital platforms will play a key role in providing women with access to information, markets, and financial services in the immediate aftermath of the crisis. Countries with digital platforms targeting women entrepreneurs, BuyfromWomen or others, can think of scaling up strategies to make them accessible to the maximum number of women beyond the direct beneficiaries of these programmes. This will require innovation and partnerships with other actors, but it can have a large impact on mitigating some of the direct consequences of confinement and lockdown.

  o Using WEPs to mobilize private sector to support the COVID gender response. In countries with significant numbers of WEPs signatories, UN Women should reach out to them to advise on how to mitigate the impact of COVID on workers and to encourage gender responsive supply chain practices (by sourcing from women-led businesses) during the recovery period. UN Women’s CO in Georgia has done so, and a copy of the letter can be shared with interested COs.

  o Climate Smart Agriculture. UN Women COs can rethink and adapt Women in Climate Resilient Agriculture flagship initiatives to identify ways in which they can contribute to mitigate the impact of the crisis. For example, in Senegal, UN Women is working with the Government to provide a minimum food security basket to vulnerable households including rice from women producers of the Climate Resilient Agriculture flagship. The programme provides food baskets door to door, contributing not only to food security but also to the reduction of the spread of COVID and securing the livelihoods of rural women producers. Other countries with established flagships around food value chains could undertake similar initiatives.
Ongoing dialogue with CSOs and women entrepreneurs’ networks. It is important that UN Women COs continue their dialogue with CSOs, implementing partners and women entrepreneurs’ networks. This dialogue is critical for the ongoing assessment of the socio-economic impact of the crisis as well as to identify key elements of the response. This can be done by phone or through digital means if necessary.

DATA COLLECTION AND RESEARCH

The current epidemic has brutally changed behaviors and habits, be they health, economic or social. In an environment that has so profoundly changed in such a short period, it is imperative to rapidly measure the extent of these upheavals and how they affect men and women, girls and boys differently to be able to quickly redirect programs into efficient activities in line with the new situation. Women Count’s suggestion is to conduct a rapid assessment of the situation in each country to rapidly access information. The initiatives below could be put in place:

At national level:

- Check that the data published on the number of cases are systematically disaggregated by sex and age. For now, statistics show that the disease affects men and women equally. However, the number of cases is constantly increasing, and it is to be feared that women, being those who usually take care of the sick both at home and in the hospital environment (nurses), end up being disproportionately affected by epidemic.

- If the Ministry of Health is already producing this information at the national level (with the support of WHO and the NSO), it should be carefully and systematically analyzed from a gender perspective.

- If this information has not yet been produced by the Ministry of Health, the UN Agencies must provide support to do so.

- Contact the National Institute of Statistics and the other agencies of the UN to find out if they planned to produce a survey on the impacts of COVID-19 on households. Then send the information to the regional office (to Michele Seroussi). In Senegal, the Ministry of Economic Cooperation asked the statistic agency to produce such information. It is essential that UN Women be a partner of such initiatives, particularly (but not only) in countries where the Women Count program has interests (Senegal, Cameroon, Côte d’Ivoire and DRC).

- If a data collection operation is planned, UN Women can support review of TORs, data collection tools, indicators to be collected, etc. It must ensure that thematics such as loss of income, increase in unpaid care at home for women and girls and/or domestic violence are included in the survey and that a gender-disaggregated analysis is systematically done.

- Use safe data collection methods. In times of such significant contamination, it is impossible to send teams of interviewers or to implement partners to the field for face-to-face interviews. Nor would it be very ethical to recommend such practices when all UN personnel are themselves confined to their homes to ensure their safety. It is therefore necessary to consider other means of collecting data. One of the solutions recommended by Women Count is to work in partnership with (cont.)
private phone companies, who could send the questionnaires to their subscribers and send us back the responses. However, this poses several technical and logistical challenges that need to be explored in detail and on a case-by-case basis in each country. Questions of cost should also be considered. The first steps should be for UN Women COs to contact NSO and phone companies to check if the practice of phone surveys already exists and see how it can be used in this case.

- Related to private phone operators: talk to the NSO or Ministry of Communications about possible partnership/experience/interest they may already have with private phone companies that we could benefit from to launch our survey.

At a regional level:

- A draft questionnaire (in French and English) will be sent to CO for their review and input; we want to end up with a UN Women standardized regional tool that could be presented to NSO and partners (in country) to start the discussion around this rapid assessment.

- Meetings will be organized by UN Women regional office with other UN regional agencies for collaboration on this topic.

III. SUPPORT FROM WCARO AND HQ

WCARO has set up a regional coordination mechanism for a harmonized and holistic response to the pandemic. A weekly meeting has been organized with all country representatives. A task team of all regional advisers has also been set up to better support country offices. The task team will provide the following type of support:

- Technical support for the development of country UN Women specific or joint programs on COVID-19.

- Development of tools and materials on COVID-19.

- Support for resource mobilization through identification and contact of donors.

- Sharing accurate information from global and regional coordination mechanisms.

- Organization of online capacity building of staff and partners.

- Carry out regional studies on the impact of COVID-19 on women.

- Improve internal coordination and communication mechanisms on COVID-19 by developing a mapping tool of all UN Women interventions on COVID-19 and uploading all useful documents on WCARO share point.

- Document good practices and lessons learned from the current situation that can be used in the future.