This Mapping study is conducted in the framework of the UN Women project “Promoting Gender Responsive Polices and Budgets: Towards Transparent, Inclusive and Accountable Governance in the Republic of North Macedonia”, funded by the Swiss Agency for Development and Cooperation and the Swedish International Development Cooperation Agency – Sida.
MAPPING THE IMPACT OF COVID-19 ON THE SOCIO-ECONOMIC SITUATION OF WOMEN AT LOCAL LEVEL

Skopje, May 2020
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CHAPTER 1 – INTRODUCTION

The COVID-19 pandemic is considered as the greatest global health crisis of the century, causing major disruptions in the global economy. North Macedonia, as all countries, has been taking serious steps in suppressing the transmission of the virus and mitigating the degree of impact which the virus can have on the country’s health, social and economic system. According to ILO (2020)\(^1\), the crisis can cause bankruptcy and closure of micro-and small enterprises, loss of jobs and income that seriously affects the livelihoods of households and individuals throughout the world. Furthermore, according to UN (2020)\(^2\), “across every sphere, from health to the economy, security to social protection, the impacts of COVID-19 are exacerbated for women and girls”.

The first infected cases in North Macedonia were registered on February 2020. Due to the rapid increase of confirmed cases, North Macedonia declared nationwide state of emergency and implemented numerous containment and lockdown measures to mitigate the COVID-19 spread. As of 30th May, the country has reported 2,226 confirmed cases of COVID-19 and 133 deaths. Out of the total confirmed cases 1,144 are women while 1,082 are men. Though the incidence of virus infection is higher in women, deaths are more evident in men. From the 133 reported deaths due to COVID-19, 91 men lost their lives compared to 42 women\(^3\).

The table 1 below shows that the only city that has not been affected by COVID-19 is Resen. The largest cumulative incidence is observed in Kumanovo, followed by Prilep, Veles, Debar, Shtip and Skopje.

---


\(^3\) Institute for public health (website), Daily report on COVID-19 outbreak, published on 30\(^{th}\) May 2020
### Table 1: Cumulative distribution of cases of COVID-19 per city, status 30th May 2020

<table>
<thead>
<tr>
<th>Cities</th>
<th>Total</th>
<th>Incidence /100 000</th>
<th>Deaths (total)</th>
<th>Mortality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Skopje</td>
<td>841</td>
<td>136,2</td>
<td>34</td>
<td>5,5</td>
</tr>
<tr>
<td>Kumanovo</td>
<td>455</td>
<td>318,9</td>
<td>21</td>
<td>14,7</td>
</tr>
<tr>
<td>Prilep</td>
<td>211</td>
<td>221,4</td>
<td>14</td>
<td>14,7</td>
</tr>
<tr>
<td>Tetovo</td>
<td>210</td>
<td>105,1</td>
<td>20</td>
<td>10,0</td>
</tr>
<tr>
<td>Veles</td>
<td>130</td>
<td>196,2</td>
<td>10</td>
<td>15,1</td>
</tr>
<tr>
<td>Struga</td>
<td>84</td>
<td>123,8</td>
<td>18</td>
<td>26,5</td>
</tr>
<tr>
<td>Shtip</td>
<td>76</td>
<td>144,3</td>
<td>2</td>
<td>3,8</td>
</tr>
<tr>
<td>Debar</td>
<td>51</td>
<td>183,8</td>
<td>4</td>
<td>14,4</td>
</tr>
<tr>
<td>Kochani</td>
<td>33</td>
<td>68,8</td>
<td>2</td>
<td>4,2</td>
</tr>
<tr>
<td>Bitola</td>
<td>28</td>
<td>27,5</td>
<td>2</td>
<td>2,0</td>
</tr>
<tr>
<td>Gostivar</td>
<td>26</td>
<td>21,7</td>
<td>3</td>
<td>2,5</td>
</tr>
<tr>
<td>Ohrid</td>
<td>23</td>
<td>41,0</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Negotino*</td>
<td>12</td>
<td>51,1</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Kriva Palanka</td>
<td>6</td>
<td>25,1</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Kavadarci</td>
<td>5</td>
<td>11,6</td>
<td>1</td>
<td>2,3</td>
</tr>
<tr>
<td>Radovish</td>
<td>4</td>
<td>12,3</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Gevgelija</td>
<td>4</td>
<td>11,6</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Pehchevo</td>
<td>3</td>
<td>60,1</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Krushevo</td>
<td>3</td>
<td>31,5</td>
<td>1</td>
<td>10,5</td>
</tr>
<tr>
<td>Vinica</td>
<td>3</td>
<td>15,4</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Kichevo</td>
<td>3</td>
<td>5,2</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Strumica</td>
<td>3</td>
<td>3,2</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Kratovo</td>
<td>2</td>
<td>20,9</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Makedonski brod</td>
<td>2</td>
<td>17,9</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Vandalovo</td>
<td>2</td>
<td>16,9</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Probishtip</td>
<td>2</td>
<td>13,1</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Demir Hisar</td>
<td>1</td>
<td>11,9</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Berovo</td>
<td>1</td>
<td>7,7</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Sveti Nikole</td>
<td>1</td>
<td>4,9</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Delchevo</td>
<td>1</td>
<td>4,2</td>
<td>1</td>
<td>4,2</td>
</tr>
</tbody>
</table>
Women are more exposed to the virus. Nurses, caretakers and janitors are key professions that are on the frontline of the response to COVID-19. Majority of them are in low-paid positions. Out of 21,200 medical staff, 15,355 are women (or 72.33%). The labor intensive and low paid work in the health care sector is best illustrated by the fact that one nurse should work 17 days in night shift, and 4 days in day shift to make the same salary as an average public sector employee that works 21 days in a month from 9 to 17. Apart from the medical staff, shop assistants, cleaners, textile workers, pharmacists are also working around the clock in supermarkets, public sector, pharmacies and other services, risking their own health as they are disproportionately exposed to potentially infected population.

The COVID-19 crisis affects women and men differently. Compounded economic impacts are felt especially by women and girls who are generally earning less, saving less, and holding insecure jobs or living close to poverty. Recent data point out a massive increase in the unemployment rate since February 2020, particularly for young women. It reveals the significance of the care and health sector, referring to both paid and unpaid care work as well as women’s specific roles and risks during the crisis. One of those risks is domestic violence, as many women are being forced to ‘lockdown’ at home with their abusers, whereas at the same time services to support survivors are being disrupted or made inaccessible.

As the United Nations Secretary-General’s policy brief on the impact of COVID-19 on women makes clear, the pandemic is deepening pre-existing inequalities and exposing vulnerabilities in social, political and economic systems which are amplifying its impact.

4 Center for Research and Policy Making (website), Infographic, Колку се платени македонските медицински сестри?, May 2020, https:/cutt.ly/7yvY7bJ
5 Ibid
8 Ibid
Since the outbreak of COVID-19, the government of North Macedonia introduced measures for prevention and protection from COVID-19 that among other, included:

- Closure of schools and kindergartens since March 10th;
- Emergency situation declared on March 18th which allowed imposition of a nationwide curfew to reduce the spread of COVID-19 with restricted movement on individuals over the age of 67 and adolescents under the age of 18, exempting people in need of emergency medical assistance from the curfew and essential workers such as police, armed forces, health workers, and producers directly engaged in agricultural work;
- Practicing two-meter social distancing in public and wearing a protective face covering in closed public spaces, including markets, shops, banks, post offices, health facilities, and public transport, as well as in open spaces, whereas grouping of more than two people was prohibited;
- Limited working hours, restricted access, or closed operations for private companies, including hotels, stores, shopping malls, cultural institutions, and other commercial businesses.

Official data show that in the period of March – April 2020 around 8,160 people in the country lost their jobs. Most of them were employed in the production industry, retail sector, tourism and food industry.\(^{10}\) The measures for ensuring physical distance to avoid the spread of COVID-19 led to the shutdown of industries, public places and events, reducing public transport and international air traffic, sending everyone back home and keeping infected persons quarantined indoors. Therefore, in order to respond to the socio-economic impact of COVID-19 pandemic to the citizens, the Government introduced set of economic measures, categorized as: tax delays and reductions, financial assistance to companies and liquidity protection, protection of the living standard, liquidity of the state budget, social protection, health care and child protection.\(^{11}\)


\(^{11}\) Article on Focus (website), Агенција за вработување, од 11 март до 30 април нови 8160 невработени, Май 2020, https://cutt.ly/Ny1ft99

\(^{11}\) https://koronavirus.gov.mk/merki/ekonomski-merki
The unpaid care economy became the resilient cushion factor of the crisis, and again women have taken the biggest burden. The work consists of taking care of children and sick family members, facilitating life for elderly people or family members with disability, managing the home (shopping, cleaning, cooking, washing clothes etc.) and providing long-term unpaid support to the community of friends, neighbors, and other acquaintances who have a disability or suffer from chronic illness. With the closure of schools and kindergartens the dominant presumption is that the “childcare and elderly care can be “soaked up” by mostly women, effectively providing a huge in-kind subsidy to the paid economy. This pandemic should remind us of the true scale of that distortion”¹².

Municipalities have also organized their response on local level. Local governments are not only at the forefront of the COVID-19 pandemic, but they are also likely to see its lasting effects on the quality of life. Thus, the financial impact of the COVID-19 outbreak on municipalities is expected to be long-lasting and significant. It is clear that municipalities will face increased spending and declining of revenues (due to closure of businesses, lower tax collection etc.).

Moreover, for the majority of the municipalities additional problem would be lack of the remittances from the diaspora, which in the past years were important source of revenue and served as financial safety net for the local communities. According to the World Bank, the remittances are projected to decline, as diaspora workers lose their jobs in destination countries or are left with lower income¹³.

This mapping study focuses on the impact of COVID-19 on the socio-economic situation of women and men at local level. It identifies the rapid response interventions of the Local Self Government Units (LSGUs) to address COVID-19, the gender impact of this response and what the municipalities could do in the recovery period.


Map 1: Cumulative incidence of COVID-19 per municipality

Source: Institute of public health, May 30th 2020

Methodology

The mapping study is conducted by UN Women within the project “Promoting Gender Responsive Policies and Budgets: Towards Transparent, Inclusive and Accountable Governance in the Republic of North Macedonia” (2018-2022). The main objective of the project is to engender the public financial management and strategic planning processes at central and local level through systematic integration of GRB. The project provides continued capacity strengthening and mentoring support to 21 LSGUs on the application of GRB as a tool for local policy making and budgeting.

This mapping study is providing an overview on the situation in 20 LSGUs, which represent one fourth of the municipalities in the country. The study focuses on identifying the role of the Coordinators of Equal Opportunities (coordinators) in the process of responding to the crisis, the gender impact
of COVID-19 on the life and the economy in the targeted municipalities and detecting possible interventions to support the municipalities in closing the gender gaps during and after the emergency period. The study looks through the perspective of coordinators in the 20 municipalities.

The primary research was conducted in April 2020. The method used included a quantitative analysis and as data collection instrument a questionnaire was introduced consisting of three groups of questions: (i) mapping of the socio-economic impact of the crisis on the municipalities, with focus on identifying the groups at highest risk; (ii) Identifying the immediate actions taken by the municipalities in response to the crisis; and (iii) assessing the possible consequences and future needs of the municipalities.

The mapping questionnaire was answered by 26 respondents from the following municipalities: Aerodrom, Bitola, Bogdanci, Bogovinje, Centar, City of Skopje, Gazi Baba, Gostivar, Kisela Voda, Kumanovo, Mavrovo and Rostushe, Novaci, Ohrid, Shtip, Strumica, Tetovo, Veles, Sveti Nikole, Kochani and Kriva Palanka.

The respondents were the Equal Opportunity Coordinators in the 21 Municipalities covered by the project and a few councilors from the local Commissions for Equal Opportunities. Both are encompassing the gender equality machinery on local level. In accordance with the Law on equal opportunities of women and men, Article 14, p.6 the Commission on equal opportunities provides opinion and contributes to the development of policies, programs and budgets and proposes how the gender equality principle can be incorporated and formalized in the work of the municipality, as well as it is responsible for monitoring of the implementation and results achieved in promoting gender equality at local level. The same article 14, paragraph 7 entitles the Equal Opportunity Coordinators with the right to give proposals and opinions on the advancement of gender equality in the municipality. Taking in consideration their authority, the gender machinery can have an important role in mainstreaming gender perspective in the COVID-19 response on local level, during the crisis, but especially in the post-recovery period. For the analysis, it is of outmost importance to assess the involvement of coordinators in development of municipal interventions in response to COVID-19, i.e. to assess whether local governments’ commitments to GE were taken in consideration with their response to COVID-19.

Limitations to the Mapping Study

It is important to mention that the mapping faces few limitations that need to be taken into consideration. Firstly, the mapping study was developed with the purpose to assess the situation on local level from the perspective of the Coordinators for Equal Opportunities and Municipal Councilors. Secondly, the mapping study was conducted on a small sample size where a total of 26 respondents from 20 municipalities answered the questionnaire, out of which 4 respondents were municipal councilors. Finally, the survey analysis found cases of discrepancy between the responses of the coordinators and the councilors from the same municipality. This could be result of lack of information sharing in the municipality or the fact that councilors are involved in decision making and hence they are more informed on the interventions, whereas coordinators are less informed due to part-time working hours or absence from work. Despite these inconsistencies, the mapping study provides an overview of the socio-economic impact of COVID-19 to women in the targeted municipalities and is a good basis for designing gender responsive interventions to support municipalities during and after the emergency period.
CHAPTER 2 - HOW COVID-19 AFFECTS ME AND MY MUNICIPALITY

COVID-19 outbreak impact on the job of Coordinators of Equal Opportunities

With the ongoing COVID-19 pandemic, many organizations and institutions had to rapidly adjust their way of operating. It is evident, that the pandemic forced them to rely on digitalization and adjust to a new modality of working remotely.

From the survey, it is evident that the majority of the respondents (14 out of 26) are working short hours and in shifts, 6 respondents are not going to work due to chronical illness or taking care of children younger than 10, 4 are working full time in the office whereas 3 are working remotely from home without physical presence in the municipality offices (Chart 1). This shows the different approaches by municipalities in organizing their daily work during the crisis. It also shows that the ‘business as usual’ is applicable only to less than 30% of the municipalities in the sample.

It is evident that in 6 municipalities the local gender machinery is working with limited capacities, due to the situation. In those places there is a higher risk that the municipal interventions to respond to COVID-19 will not be gender responsive, having in mind the fact that coordinators are expected to be the driving force for mainstreaming gender in the policymaking and budgeting processes.
Municipal response to COVID-19 and its gender responsiveness

As mentioned above, the analysis strives to identify the rapid response interventions of the LSGUs to address COVID-19. It is evident that all municipalities are undertaking activities to disinfect public spaces. 16 respondents claimed that their municipality donated masks and gloves to the local hospitals whereas 15 respondents claimed that support was provided to families in need. Only 9 municipalities initiated online activities for children, 15 organized mobile teams for home visits of the elderly and 13 organized mobile teams for home visits of people with disabilities. It is important to highlight that 13 municipalities disseminated information on the availability of social services for vulnerable groups. At the time of the survey, only 6 municipalities have not yet equipped the municipal public services with protective gear (gloves, face shields and mask etc.) whereas 8 municipalities had disseminated masks and gloves for citizens in supermarkets and in public areas (Chart 2).
Furthermore, the respondents shared additional information on interventions undertaken in response to COVID-19, such as:

- Using different programs from international donors for providing support to the elderly people and people with disabilities;
- Handing over three official vehicles to the Ministry of interior and realization of an online meeting of the Council of the Municipality;
- Providing of space for constructing a field hospital in the backyard of the Clinical Center;
- Designated disinfection area at the entrance of the Municipality;
- Disinfection of residential buildings;
- Disinfection of streets;
- Dissemination of masks for the citizens working in the municipality’s markets;
- Donation of funds to the Red Cross for distribution of food/hygienic products.

**Chart 2**

<table>
<thead>
<tr>
<th>Interventions</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distribution of Public Places</td>
<td>26</td>
</tr>
<tr>
<td>Distribution of Medical and Pharmaceutical Products</td>
<td>18</td>
</tr>
<tr>
<td>Monthly salary for Teachers</td>
<td>15</td>
</tr>
<tr>
<td>Outreach activities conducted in schools</td>
<td>9</td>
</tr>
<tr>
<td>Distribution of face masks</td>
<td>15</td>
</tr>
<tr>
<td>Information on the role of women in society’s work</td>
<td>14</td>
</tr>
<tr>
<td>Distribution of hygiene products for public use</td>
<td>12</td>
</tr>
<tr>
<td>Distribution of hygiene products for schools and students</td>
<td>7</td>
</tr>
<tr>
<td>Engaging in public service with measures for women</td>
<td>7</td>
</tr>
<tr>
<td>Other</td>
<td>7</td>
</tr>
</tbody>
</table>
The second issue explored in this study was the perception of coordinators regarding the gender responsiveness of the municipal interventions to respond to COVID-19. Accordingly, 14 respondents believe that the measures undertaken by the municipalities are taking into consideration the needs of women whereas 6 coordinators have a perception that women’s specific needs are not incorporated in the measures (Chart 3).

In order to identify the types of interventions that take into consideration women’s needs, the respondents who answered YES were asked to elaborate on the type of the measures. The following measures were introduced to address to the specific needs of women:

- Mobile teams for home visits and assistance to the elderly, people with disabilities and information on the availability of social services for vulnerable groups;
- Donation of medical masks and other protective gear for the medical staff among whom the most are women;
- Logistic and psychological support for the cultural workers among whom the most are women (for example opera singers, ballet artists, and others);
- Monetary support for single mothers;
- Assistance in providing groceries for the elderly, including women.
- Disinfection of bus stations where female textile workers are waiting for buses to get to their factories.

Interestingly, it could be noted that the coordinators recognize two measures that were adopted on national level as gender specific: continuation of the maternity leave and release from work for one of the parents of children younger than 10. Hence, the coordinators also pointed out that these measures, as a result of the dominant gender roles, forced more women than men to stay home with their children.
Out of 20 municipalities, 17 have allocated a separate budget to respond to COVID-19 emergency. The municipalities are mainly using funds from the following budget lines: current reserves, budget lines from the annual programs, social transfers, other communal services, funds for municipal administration, funds for hygiene and disinfection.

The reallocated funds from the municipal budgets were mostly spent on the following: disinfection of public spaces, donation of masks and gloves to local hospitals, monetary support to families, delivery of social services, raising awareness concerning COVID-19, information on availability of social services, donations to vulnerable communities. It can be also observed that in some municipalities funds were reallocated to support the elderly and persons with disabilities (Chart 4).
Chart 4

What was it mostly spent on?

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distribution of packages</td>
<td>14</td>
</tr>
<tr>
<td>Distribution of water to local population</td>
<td>9</td>
</tr>
<tr>
<td>Prorogation of schools</td>
<td>8</td>
</tr>
<tr>
<td>Media support</td>
<td>5</td>
</tr>
<tr>
<td>Assistance to homeless family of elderly</td>
<td>4</td>
</tr>
<tr>
<td>Assistance to homeless people with disabilities</td>
<td>7</td>
</tr>
<tr>
<td>Delivery of social services</td>
<td>7</td>
</tr>
<tr>
<td>Reinforcement of the COVID-19</td>
<td>6</td>
</tr>
<tr>
<td>Information related to COVID-19</td>
<td>6</td>
</tr>
<tr>
<td>Donation to vulnerable communities</td>
<td>3</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
</tr>
</tbody>
</table>

Role of Coordinators of Equal Opportunities in development of the response measures to COVID-19

In the majority of the municipalities the coordinators were not consulted in the process of designing the municipality’s interventions in response to COVID-19. Only 5 coordinators provided opinion and their recommendations were fully taken into consideration when designing the interventions (Chart 5).

Coordinators provided the following examples of their contribution in designing gender responsive interventions:

- In the distribution of packages with food and hygienic products, the single parents and survivors of domestic violence should be taken into consideration and prioritized;
- When engaging persons for temporary work during the crisis, the gender balance should be taken into consideration;
- Support to socially disadvantaged people and other categories of citizens that are included in the social protection program;
- Logistical and psychological support to adult artists (organizing of concerts in the neighborhoods where they can perform);
- Responding to an increased demand from unemployed single mothers and providing food packages;
- Support to socially vulnerable categories of citizens, with special focus on women, such as support to survivors of domestic violence.

Chart 5

Have you been asked for an opinion/advise in the development of interventions the municipality has undertaken so far in response to COVID-19?

- Yes: 5
- If yes, taken in consideration: 5
- No: 20
CHAPTER 3 - HOW COVID-19 AFFECTS WOMEN AND MEN ON LOCAL LEVEL

According to the Policy Brief: The Impact of COVID-19 on Women\textsuperscript{15}, the emerging evidence on the impact of COVID-19 suggests that women’s economic and productive lives will be affected disproportionately and differently from men. Across the globe, the gender pay gap remain the same, women earn less, save less, hold less secure jobs, are more likely to be employed in the informal sector. They have lower access to social protections and are the majority of single-parent households.

The impact of COVID-19 on socio-economic status of women and men – from the perspective of the local gender equality mechanisms

The outbreak will have a significant impact on the socio-economic situation at local level. The analysis shows that majority of the respondents share the same view in relation to the socio-economic impact on women and men in their municipalities. Accordingly, 22 think that the pandemic will have large impact whereas 4 respondents consider that it will have medium impact on the socio-economic status of the citizens (Chart 6).

In terms of whether the COVID-19 pandemic affects women and men differently, almost half of the respondents think that it affects women more than men (Chart 7).

**Chart 6**

What is your personal view on the impact of the COVID-19 outbreak on the socio-economic status of the citizens in your municipality?

<table>
<thead>
<tr>
<th>Medium</th>
<th>Large</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>22</td>
</tr>
</tbody>
</table>

**Chart 7**

Do you think that the outbreak of COVID-19 pandemic affects?

<table>
<thead>
<tr>
<th>Women more</th>
<th>Men more</th>
<th>Equally</th>
<th>None of the above</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>2</td>
<td>12</td>
<td>1</td>
</tr>
</tbody>
</table>
The opinion of the respondents is reflecting the major statistical findings in all countries affected by COVID-19\textsuperscript{16} (women are more affected by COVID-19 than men). It is important to point out, that sex-disaggregated data for COVID-19 results collected worldwide show equal numbers of cases between men and women, but the differences are found in mortality and vulnerability to the disease. Additionally, women are exposed to greater risk than men as the majority of health-care workers are women and it is expected that bigger secondary impacts of the outbreak to be on the girls and women, particularly the most excluded (socio-economic effects, gender-based violence etc.)\textsuperscript{17}. In a time of pandemics, the global lockdowns also limited girls’ freedom and autonomy. This analysis further elaborates the situation in North Macedonia and can be seen as a basic screening of the situation on local level giving a direction for a possible scenario of the effects of COVID-19 on women. Therefore, all stakeholders on national and local level have to understand the importance of collecting sex-disaggregated data from the on-going actions and support measures as well as incorporating a gender analysis into preparedness and response plans.

There is no doubt that the pandemic has negative effects on all sectors in our economy. The perceptions of respondents is that athletes and the self-employed men and women are at highest economic risk due to COVID-19 outbreak. In contrast, the respondents consider that women are exposed at greater economic risk than men mainly as employees in the public sector, employees in private sector and as small agricultural producers (Chart 8). According to the Annual Report on Data from the Public Sector Employees Register 2019, 55% of the employees in the public sector are women and 45% are men\textsuperscript{18}.

The coordinators and the counselors consider men to be at greater economic risk than women as small and medium business owners and as unemployed persons (Chart 8). According to the latest Labour Force Survey\textsuperscript{19}, men are more represented among the active population and thus the percentage of men registered as unemployed or as business owners is higher than with the

\textsuperscript{16} UN Women, COVID-19: Sex-disaggregated case data (provisional analysis), May 2020

\textsuperscript{17} United Nations policy brief (website), The impact of COVID-19 on Women, April 2020, https://cutt.ly/Jy1dKO5

\textsuperscript{18} Ministry of Information Society and Administration (website), Годишни извештаи од регистрата на вработените во јавниот сектор 2019, March 2020, https://cutt.ly/fy1fDTK

women. This indicates that men are more active participants in the economy and therefore it can be expected that the crisis will have higher impact on men in these categories. That is why respondents expect that these will have higher impact on men. Generally, all respondents note that large negative economic effects will be felt by small and medium business owners and by the self-employed.

In your opinion, which of the categories in the list below, in your municipality, are at the highest economic risk due to COVID-19 outbreak?

- Employees in public sector
- Employees in private sector
- Athletes
- Small agricultural producers
- Small and medium business owners
- Self-employed (Trgovec poedinec)
- Unemployed
Tourism, hotels and catering services are the sector at the highest economic risk due to COVID-19 outbreak. The further sector with very high risk is the sector of self-employed, closely followed by the small and medium business owners. The production sector is also at high economic risk, and in this sector, women are again more numerous than men. Employees in the private sector, in general, experience more negative effects of this pandemic. The textile industry must be mentioned here, since in this industry again large majority of the employees are women. The conclusion is that those sectors and activities in which women are more represented than men are most affected by COVID-19. IT, telecommunications and energy are sectors with lowest economic risk due to COVID-19 outbreak (Chart 9).

Chart 9

**Employers in private sector**

- Arts and crafts
- Daycare services/ Private educational institutions
- Tourism/Hospitality/Catering services
- IT/Telecommunications/Energy
- Textile industry
- Trade
- Production

- Men
- Women
Effect of the virus on vulnerable groups- from the perspective of the local gender equality mechanisms

The general impression is that the level of social risk is similar for all vulnerable categories in terms of gender. The results show that single mothers and survivors of domestic violence are at the highest social risk during the crisis and this is particularly evident for women. In contrast, the highest social risk for men is noticed among people with disabilities and the homeless (Chart 10).

The closure of schools and daycares forced many single parents (mostly women) with children under 10 to stay at home and focus more on unpaid care. This measure, combined with the fact that women are predominantly employed in the most affected industries can cause job insecurity and increased financial uncertainty for women. An additional challenge for single mothers who are able to work from home is the struggle to balance the professional obligations with the housework and the childcare duties.

Since the outbreak of COVID-19 many countries witness increase of sexual and gender-based violence (SGBV) (UK, Brazil, Germany, Italy, Spain and the United States). For illustration, in the UK\textsuperscript{20} there has been a 120% increase in incidents of domestic violence. Isolation measures create favourable environment for the perpetrators, whereas the lockdowns decrease the access to services for the victims. Possible actions to fight SGBV is the use of social media to raise awareness and support the survivors. The same tendency can be noted in our country. Numbers show that there has been an increase of domestic violence if one compares this period of the year (January–March) in 2019 and 2020. In 2019, there were 780 reported complaints of domestic violence registered by the Ministry of Interior Affairs, compared to 920\textsuperscript{21} such incidents registered this year.

Older people are particularly susceptible to the risk of infection from COVID-19, especially those with chronic health conditions who are likely to be less capable of supporting themselves in isolation. Although social distancing is necessary to reduce the spread of the disease, such measures if not implemented correctly can also lead to increased social isolation of older people at a time when they may be at critical need of support.

\textsuperscript{21}Article on meta.mk (website), Зголемен бројот на случаи на семејно насилство за време на карантинот, April 2020, https://cutt.ly/Qy1JErJ
Persons with disabilities face double challenges in accessing health-care services, due to lack of availability, accessibility and affordability of such services. In addition, the movement restrictions and the isolation, can potentially affect their mobility even more due to lack of a personal assistance even inside their own homes.

Response measures to Covid 19 and their impact on women and men

The analysis shows that for women all listed measures have high rate of impact, except closing of restaurants and cafes, whereas for men the highest rate of impact is noticed with the closure of the sports centers, the imposed curfew, and the closure of the restaurants and cafes (Chart 11).

On average, respondents share the view that all measures have equally high level of impact on women and men. However, the effects from closing schools and day-care centers as well as the work from home tend to slightly skew towards women as the burden of unpaid care passed mainly to women given that usually they are the ones who stay at home with children under 10 years of age, as confirmed with the findings from the question bellow.
On average, respondents share the view that all measures have equally high level of impact on women and men. However, the effects from closing schools and day-care centers as well as the work from home tend to slightly skew towards women as the burden of unpaid care passed mainly to women given that usually they are the ones who stay at home with children under 10 years of age, as confirmed with the findings from the question bellow.

Chart 11

The impact of the below listed measures on women and men?

The amount of unpaid care work increased for women and there is substantive difference in the amount of time women and men spend on the following activities:

- cooking and serving meals,
- cleaning,
- decoration, repair and household management,
- shopping for the family,
- taking care of children,
- taking care of the elderly and
- paid work.
It can be concluded that, for women, the time spent on cooking and serving meals, cleaning, taking care of children and taking care of the elderly has increased, whereas for men there has been an increase in time spent on shopping for the family and taking care of the elderly. Moreover, for both, men and women, the time spent on decoration, repair and household management has stayed on the same level as before COVID-19 (Chart 12).

Chart 12

How did the time spent for the following activities change for women and men?

- Paid work
- Taking care of elderly
- Taking care of children (teaching, playing, care)
- Shopping for the family
- Decoration, repair and household management (e.g. paying bills)
- Cleaning (e.g. clothes, household)
- Cooking and serving meals

0 1 2 3 3

Men Women

Apparently, according to the perceptions of the coordinators and the councilors the increased presence of men at home did not lead to their taking on an increased share of the unpaid work. The lockdown was a unique opportunity for redistribution and sharing the burden of unpaid domestic and care work. The municipality can have a role in promoting this equal share of unpaid care work since a lot of work in the monetary economy is now being taken over by the unpaid care economy.
Informing citizens on COVID-19

Local governments have the primary responsibility for ensuring the health and safety of their residents. Community members rely on them to provide them with timely and accurate information about their local preparedness and response. The mapping gives an overview of the communication channels that the target municipalities are using for providing information regarding COVID-19 (Chart 13). These include internet and social media as most widely used among the municipalities for spreading information regarding the pandemics. The municipalities also use their official websites, public service announcements, and NGOs/CSOs as channels for providing information. The local media stations are also playing an important role as communication tools used by the municipalities. Furthermore, they are using different tools and methods such as the Municipal Crisis Centres to ensure that communities are well equipped to navigate the current outbreak of coronavirus disease (COVID-19).

Finally, it is important to ensure that essential information on COVID-19 are available and accessible equally for all citizens.

Chart 13

What communication channels is your municipality using to provide information COVID 19 to the citizens?
The coordinators’ perception is that people with disabilities, people living in rural areas, homeless people, Roma and/or representatives of other ethnic minorities have the basic information for COVID-19, showing no difference between women and men. In general, the respondents share the opinion that most of the categories are well informed about COVID-19. None of the categories listed below lack information about COVID-19 (Chart 14).

Chart 14

How well the citizens are informed regarding COVID-19?

- Youth
- Parents with small children
- Single parents
- Elderly
- People with disabilities
- People living in urban areas
- People living in rural areas
- Survivors of domestic violence
- Homeless people
- Roma and/or representatives of other ethnic minorities
- People living with HIV

[Chart showing distribution with 3 categories per group, with 3 in blue and 2 in red for each category across different groups.]
CHAPTER 4 – WHAT ARE THE FUTURE NEEDS OF MY MUNICIPALITY TO RESPOND TO COVID-19

On a global scale, the impact of COVID-19 will be profound. Markets and supply chains have already been disrupted, businesses are required to close or scale back operations, and millions have or will lose their jobs and livelihoods. The International Labour Organization (ILO) has estimated that full or partial lockdown measures now affect almost 2.7 billion workers, representing around 81% of the world’s workforce, whereas the IMF projects a significant contraction of global output in 2020. COVID-19 is pushing the world economy towards a global recession, which will be strikingly different from past recessions. On national level the growth rate forecast for 2020 is between 1.4 and 3.2 percent, according to the World Bank’s latest Regular Economic Report (RER) – which uses a baseline scenario and a downside scenario in the face of high uncertainty brought on by the pandemic.

In this context, opinions of those surveyed on the possible consequences of COVID-19 on the socio-economic situation in the municipalities are overwhelmingly in line with reality. It is rightfully expected that unemployment will increase, and as a result, the requests for loans and credits shall also rise as a way for the citizens to mitigate this problem which would consequently lead to the decrease of the municipal revenues and thus to shrinking of municipal budgets and budgets cuts than can affect equal opportunities programs (Chart 15).

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23 International Monetary Fund (website), An Early View of the Economic Impact of the Pandemic in 5 Charts, April 2020, https://cutt.ly/wy1HAZZ

Respondent’s greatest concerns in terms of the COVID-19 crisis can be clustered in three areas: economy, health and social protection, incorporating the quality of life.

Economic concerns are linked to respondents’ fears from the weakening of the national and local economy which would increase the number of unemployed, decrease salaries and bring about closure of small and medium-sized businesses. If this occur many families will be left without basic subsistence thus increasing level of poverty leading to overall decrease of the general standard of living.

Healthwise, respondents are most fearful for the possible increase in the number of infected citizens, but also they are concerned about how much the citizens respect the imposed government protection measures. Health risks for certain categories of citizens such as the elderly, chronically ill, people with disabilities are also considered to be increasing. The respondents are further
worried that this situation will contribute to the general weakening of the health system in our country.

The psychological impact of the crisis and its impact on the quality of life is considered worrisome. The respondents are concerned about the duration of the crisis, the possible distance that this will cause among the citizens as well as the likelihood for post-traumatic stress among citizens.

Municipal needs for post COVID-19 recovery

In order to respond to the COVID-19 outbreak, the municipalities included in this mapping analysis have pointed out the need for supplies as their greatest necessity as part of required in-kind donations. Almost equally placed is the need for financial support, i.e. the donations. At times of crisis when institutional capacities and services are limited, this kind of requests are expected to take place since municipalities’ immediate alleviation response is directed to providing free masks, gloves and food/hygiene packages to citizens, especially to most vulnerable groups. Municipal revenues are decreasing as a result of the lockdown and the imposed preventive measures countrywide which most acutely affect the local economy. This in turn influences municipal potential for providing financial support to vulnerable groups, expanding social support services as well as paying for services such as disinfection of public spaces. The regular realization of the municipal programs and budget is also at risk.

Municipalities consider as the least necessary option the funding for awareness raising campaigns which can probably be explained by the fact that the main burden for the awareness raising concerning the COVID-19 situation is carried by the central government (Chart 16). This is in the same line with the conclusion that the respondents are sharing the opinion that most of the citizens are well informed about COVID-19. None of the categories of citizens lack information about COVID-19 (Chart 14).
Municipal revenues are at significant risk due to the COVID-19 lockdown and the subsequent economic slowdown. Yet, local governments are expected to meet their obligations as set by law and regardless of their fiscal capacity. That is, whatever the outcome of COVID-19, municipalities have to continue to meet their core responsibilities as delegated by the state such as water and wastewater treatment, waste collection, fire services and recreation opportunities, to name just a few. How municipalities will approach the crisis and what exact policy measures will be undertaken by a municipality will depend on a number of factors, including the region where the municipality is situated and whether it is rural or urban. Nonetheless, municipalities are in the unique position to provide frontline services to vulnerable populations, individuals, businesses, and the non-profit sector, and to fill in the gaps left by national policy responses.

In this complex situation, the government will need to provide emergency transfers to municipalities, especially to those that have limited fiscal capacity and, ideally, should do this in all cases. Respondents also believe that the national government should provide support to the municipalities in order to alleviate local economic crisis.

Donations, subsidies, and financial support to the business sector and to the most vulnerable categories are the most frequent proposals for improving the economic challenges at local level, proposed by respondents. Other proposed recommendations are tax exemptions for certain categories of citizens,
decreasing certain local taxes and postponing obligations of businesses towards the municipality in order to provide them with the opportunity to adjust to the situation or to provide subsidies for local businesses.

Municipalities are expected to decrease budgets and to rationalize spending by adjusting costs and items. Respondents suggest deferring non-essential projects, if necessary, and cancelling projects without a firm economic justification as well as avoiding new and/or temporary employment. Furthermore, the municipalities should plan a special budget for these types of circumstances in form of reserve funds. One of the respondents from a rural municipality pointed out that farmers can be offered unused state owned land for cultivation.

Continuous disinfection of public spaces and residential buildings is seen as main necessary health action.

Health and social support should be mostly provided in the form of psycho-social support to different categories of citizens, such as single parents, survivors of domestic violence, persons who have lost their jobs and other vulnerable groups. Mapping of citizens under highest risk and mostly affected by the situation can be undertaken and mobile teams need to be set-up in order to provide needs-responsive services for categories under risk. In general, increasing citizens’ access to local services is very important, as along with developing and introducing new ones.

Finally, the respondents suggest that municipalities should develop plans for emergency preparedness in the future and be better equipped for possible upcoming emergencies.

**Target groups where future interventions should be directed**

It is expected that COVID-19 will bring about increased stigma for those that are positive to the virus, increase of domestic violence, thus directly affecting women as they are majority of domestic violence survivors and are more likely to be infected by the virus, given their predominant roles as caregivers within families and as front-line health-care workers. Closure of SMEs is also expected, which affects more men as they are predominantly business owners.

Least expected are food shortages. In general, the respondents pointed out all above mentioned consequences are likely to happen in their municipalities in the aftermath of COVID-19.

The support predominantly needs to be targeted to the following vulnerable groups: single parents, survivors of domestic violence and homeless persons. Coordinators consider youth, people with disabilities, people living in rural and urban areas, Roma and/or representatives of other minorities and people living with HIV among the ones who are also likely to be affected by future crises. Respondents stated that survivors of domestic violence, parents with small children and single parents, that are predominantly women, will be mostly affected. In all other categories women and men will be affected almost equally, whereas in the case of families with small children it is expected that the women will carry the burden of unpaid childcare (Chart 17).

![Chart 17](image-url)
CHAPTER 5 - CONCLUSIONS AND RECOMMENDATIONS FOR POST-EMERGENCY RECOVERY

Even though the central government has the leading role in responding to the pandemic, municipalities play an important role in appointment and leading the local coordination bodies for pandemic preparedness and response, including implementing the legislation and policies adopted on central level.

Considering that local government is closest to the citizens, it can identify, prioritize and guide the allocation of resources according to the needs of the local population. The local government have their own budgets and emergency institutional set ups through which they can provide additional resources for national pandemic preparedness, capacity development, and response measures.

This study showed that most of the municipalities (14 of 20 taking part in the survey) have developed measures to respond to the virus that are gender responsive. These measures should be further promoted in the 6 LSGUs, that from the perspective of the coordinators, haven’t yet introduced gender responsive measures.

Regarding the municipalities’ budgets, many have dedicated a separate budget for the COVID-19 emergency. Most of the funds from the budgets are spent on the disinfection of public spaces and the donation of masks and gloves. However, all of them do need additional funds to be able to address emerging needs stemming from the crisis.

Considering that not all coordinators are working regularly due to different approaches taken by the municipalities, but also due to personal and family reasons, in the further stages of the project it is important to assess the specific approach of the LSGUs in terms their engagement and influence on mainstreaming gender in local policies and budgets.

In only 4 municipalities the coordinators were involved in the development of the measures to respond to COVID-19. Hence, the coordinators in the municipalities covered by the UN Women project need to be empowered to provide opinion and advice on mainstreaming gender within the measures for COVID-19 response and especially in the development of policy and budgets in the forthcoming recovery period. In order to address inequalities stemming
from the COVID-19 crisis, it is important to mainstream gender in the overall policy response. This is in the interests of both women and men, as well as the entire community. Women are the hardest hit by this pandemic but they will also be the backbone of recovery in communities. Evidence show that emergency response policies that do not include gender perspective and that do not consult women or include them in decision-making are simply less effective, and can even do harm. Consequently, it is crucial to ensure gender perspective and equal representation in all COVID-19 response planning and decision-making.

General conclusions are that all respondents share their deep concerns regarding the situation with COVID-19. It is notable that the perception is that most of the citizens are informed about the situation, the implications and the possible post-crisis issues. Half of coordinators believe that women are more affected than men by the COVID-19 pandemic whereas the rest believe that there are no major differences based on gender regarding the expected implications from health, social and economic aspects. Further awareness raising, capacity development and research at local level is necessary to show that COVID-19 affects women and men differently. These observations can steer the upcoming technical and expert support to the municipalities and inform future policy development and budgeting.

In coordinators’ view, both self-employed women and men are at highest economic risk due to COVID-19 outbreak, whereas public servants are in the lowest economic risk. Women employed in the private sector, especially those working in tourism, hotel and catering services are at highest economic risk due to COVID-19 outbreak, while employees in IT, telecommunications and energy sector are at lowest economic risk within the private sector. Also, women owners of small businesses are considered in economic risk along with men owning small businesses. This is understandable since those businesses could not survive longer periods of time if companies are being closed. Interestingly, the youth and people who are living in rural areas are considered to be at the lowest social risk. There is a dominant perception that these categories can survive in any crises through subsistence farming. This is not the case for single parents and homeless people which according to the Equal opportunity coordinators are at the higher social risk due to COVID-19 outbreak.

Closing schools and day-care centers and compensation of salaries for one of the parents of children under the age of 10 are measures with the biggest impact on women; these two measures combined have increased the volume of women’s unpaid care work at home. The coordinators’ perception is that the curfew and the closing of restaurants and cafes are measures with the biggest impact on men. In terms of activities, cooking and serving meals, cleaning and taking care for elderly have been intensified for women due to the pandemic, whereas the perception is that for men taking care for the elderly and shopping for the family are the activities that have intensified in the period since the outbreak.

Civil society organizations, families, individuals, and traditional leaders all have to play essential roles in mitigating the effects of the crisis. The ‘Whole-of-society pandemic readiness’ approach should be explored. Non-governmental groups should be involved in preparedness efforts and their expertise and capabilities harnessed to help communities prepare for recovery after the pandemic.

The study shows that supplies are the biggest necessity for the municipalities and that financial resources are lacking. Therefore, donations are welcome during the emergency period. Partnerships with civil society and grassroots organizations that have a close and direct relationship with communities are often well placed to raise awareness, communicate accurate information, counter rumours, provide needed services, and liaise with the local government during an emergency.

During a pandemic, it is important that households have access to accurate information, food, water, and medicines. Municipalities should provide immediate alleviation response such as free masks, gloves and food/hygiene packages to citizens, especially to most vulnerable groups. As expected by the coordinators who responded to this questionnaire, the COVID-19 outbreak will mostly affect single parents and homeless people. Majority of single households in North Macedonia are run by women.

Finally, most of the respondents’ recommendations are in line with the idea that the municipalities should provide financial, health and social support to the citizens and prepare the municipalities for possible emergency situations in the future.
Recommendations

The COVID-19 crisis is a wake-up call for all of us. It’s time for a change. Change on how we develop policies, redistribute money and govern municipalities. A post recovery plan must be prepared that will be shaped by the crisis’ impact and the lessons learnt. This plan should put priority on education, health and economy of care as these sectors showed to be most important, being a backbone of the society struggling with the virus. A plan that will differently address the needs of women and men as they are affected differently by the virus and what is more by the response to the virus, and a plan that will target specifically vulnerable groups. In addition to this, the municipality must learn the lesson from this situation in terms of preparedness for an emergency reaction. Among the respondents there were several comments that municipalities must find ways to predict and maintain emergency budgets in future in order to be prepared for such crisis.

**Continued information sharing:** In the future, municipalities will need to develop information system and materials for people to continue respecting physical distancing and safety protocols. The information should be disseminated and adapted to the needs of different target groups. The media and the government should report on fake news related to the virus and therefore it will be essential for the municipalities in partnership with civil society organizations and citizens to control the narrative on local level. With regard to the communication, the municipalities should invest in using gender sensitive language. This is expected to make women identify themselves in the information spread and thus make the communication more effective.

**Support care economy:** What we observe in the COVID-19 crisis is people caring for each other. The mapping study shows that some municipalities have started providing an unconditional basic income to the vulnerable groups such as single parents, homeless, (cultural) freelancers, informal workers and unpaid care workers, that are currently excluded from the traditional social security system. It is therefore very important to include the unpaid care economy in macroeconomic policy and calculate the impact of specific economic policies on the volume of paid and unpaid work of women and men.

**Support work-life balance:** Municipalities must support small business adaptation to the new circumstances, by investing in their digitalization and supporting tele-working which will reduce commuter traffic and create an enabling environment for flexible working hours that allows men and women
to easily combine a job and family responsibilities. Provision of information and advice, including providing psychological support for life-work balance is what municipalities can add to their post-recovery plan. Also promoting more engaged role of men at home, balancing the burden of unpaid care work is very much needed on municipal level.

**Monitor the incidence of domestic violence and gender-based violence:**
As UN Women reports, if not tackled, domestic violence will become a shadow pandemic that will also add to the economic impact of COVID-19.27 The increase in violence against women must be dealt urgently with measures embedded in economic support and stimulus packages that meet the gravity and scale of the challenge and reflect the needs of women who face multiple forms of discrimination. Municipalities must provide support to specialized services and uphold the standards set by the Convention on Preventing and Combating Violence against Women and Domestic Violence (the Istanbul Convention, 2011).

The mapping study shows that women are maxing out and burning out. Therefore, municipalities need to help women to get through the crisis.

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