BRIEFING NOTE:
THE ECONOMIC IMPACTS OF COVID-19 AND GENDER INEQUALITY.
RECOMMENDATIONS FOR POLICYMAKERS¹
The COVID-19 outbreak demands urgent responses. As the pandemic grows, a coordinated response to providing healthcare, care policies and other measures is required in order to mitigate the social and economic impacts of the crisis. Women are often at the frontlines of the response in healthcare centers, social services, communities and households\(^2\). Women also play a central role in ensuring the well-being, care, and resilience of affected people, the elderly, children, and their families. The economic consequences will be vast and will deepen existing inequalities, including gender inequalities.
UNDP has identified three inter-linked policy areas in which support can be offered:

- **Offer 1:** Health Systems Support
- **Offer 2:** Inclusive and Integrated Crisis Management and Response
- **Offer 3:** Social and Economic Impact: Assessment and Response.

This briefing note seeks to guarantee the integration of gender equality and women’s empowerment into the three inter-linked policy areas and provide recommendations to Country Offices and governments for the implementation of gender-responsive policy measures to the COVID-19 crisis, ensuring that no one is left behind. In particular, it will develop in detail recommendations for Offer No 3 addressing the social and economic impacts of the crisis.

In response to the global health, social and economic crisis caused by the COVID-19 pandemic, unprecedented measures have been taken by local and national governments: from preventive social distancing to the restriction of movement of people; border closures; the confinement of entire cities, regions and countries; the temporary closure of formal and informal economic activities, etc. The daily lives of people have been dramatically disrupted, as has the economic, social and productive fabric that sustains societies.

Country experiences in the past with other epidemic outbreaks, such as the Ebola virus, Zika, MERS, SARS or the AH1N1, have revealed that the most vulnerable, including the elderly, people with disabilities, low-income households, households highly exposed to shocks, and informal workers without social protection or any kind of insurance, are disproportionately affected.

The guidelines and recommendations in this briefing note seek to ensure that the response to the COVID-19 crisis will be gender responsive, thus guaranteeing that no one is left behind.
It is anticipated that the COVID-19 crisis will trigger an economic recession deeper than the 2008 financial crisis. Even in a moderate scenario negative growth rates are likely, resulting in an adverse economic impact fueled by a decline in trade, a drop in commodity prices such as oil, the interruption of global supply chains, and the intensification of risk aversion and worsening of global financial conditions. The economic decline will adversely impact income and employment, especially for the most vulnerable, including women. Initial estimates forecast an increase of global unemployment of between 5.3 and 24.7 million people.

Policy responses to counter the impacts of COVID-19 must incorporate a gender perspective as social norms and cultural patterns can lead to the differentiated impacts for men and women.

Analysis of the potential impacts of the COVID-19 pandemic and the policy responses required cannot be done without the integration of a gender perspective. Beyond the distinct biological responses brought about by the disease, gender norms and cultural patterns determine the roles women and men play in a society in response to crisis, as well as the differentiated impacts they experience.

Globally, women make up 70% of the workers in the health and social sector. An overrepresentation of women in the healthcare sector, especially as nurses, increases their risk of exposure to the virus from potentially infected patients, as well as the associated socioeconomic consequences. In addition, women are overrepresented in sectors highly affected by this crisis such as tourism, air transport, entertainment, cleaning and remunerated domestic services.

In this context, women in situations of poverty and high vulnerability will be affected, not only by the increase of the care burden and the loss of income for those in informal jobs, but also by the material conditions and infrastructure of their households, neighborhoods and communities. Women and families living in marginalized urban areas and remote rural areas with limited access to drinking water and sanitation, and overcrowded and unhealthy households and communities face difficult
challenges in complying with social distancing measures established by governments to contain the spread of the virus. Social distancing policies are difficult to apply in contexts where the effectiveness of the measures designed to prevent the spread of the virus are associated with class distinctions and privileges. In certain circumstances, social distancing policies can go against the intended effect, increasing the risk of transmission in precarious and marginalized communities and territories.

The burden of unpaid care work has also increased. Women are the primary caregivers at home and in general have more domestic chores and responsibilities compared to men. Worldwide women and girls do 2.5 times as much unpaid care and domestic work as men. With the outbreak of COVID-19, and the need to care for patients at home and care for children following school closures, this burden on women has increased.

Migrant women, especially those involved in domestic care, face a higher likelihood of exposure to the disease if they are able to maintain their jobs. When unable to do so, as for example as a consequence of movement restrictions, they experience disproportionate socioeconomic effects derived from the loss of income. Unequal power relations and discriminatory social norms may impose additional risks for migrant people in contexts where xenophobia and discrimination may prevent them from accessing employment.

The FAO has recognized that “the basis for the vulnerability of women, especially rural and indigenous women to chronic poverty, is found in discriminatory labor markets and the social exclusion of political and economic institutions.” Changes in markets and consumption
patterns could aggravate the level of vulnerability due to a sudden reduction in demand and for agricultural products, thereby decreasing available income. Furthermore, the restriction of movement prevents women from carrying out agricultural and livestock activities and obtaining essential resources for their families (e.g. water, firewood, natural food resources, etc.), putting both their well-being and their families at risk.

Similarly, the ILO warns that the employment crisis derived from the COVID-19 outbreak could disproportionately affect specific groups, further exacerbating inequalities. Among these groups are those who are unprotected and poorly paid, in particular young people, older workers, women and migrants.

There are also high levels of informal labor happening in the developing world. The realities that informal workers face creates particular challenges in guaranteeing the effectiveness of policy measures adopted in response to the COVID-19 crisis. Quarantines, social
distancing measures, restriction of movement and closures of businesses and decreased economic activity may disproportionately affect individuals and families who derive their livelihood from informal activities. Precarious employment combined with weak social protection systems put those who are unprotected at particular risk.

In most developing countries current social protection and social security systems are ill prepared to face the shock of required measures to stop the spread of COVID-19 or to mitigate its impacts.

School closures also endanger the accumulation of human capital of boys, girls and adolescents, despite government efforts to implement distance learning methods. Low internet in vulnerable urban and rural households, as well as low digital skills, especially for women, put their learning processes at risk. Likewise, school closures impact the capacity of many girls and boys in vulnerable situations to receive sufficient nutritional intake, undermining both health and their human capital. While this is true across the world, girls attending school in the least developed countries may never return once schools reopen.

**Within the context of the COVID-19 crisis, migrant and refugee women are in particularly precarious situations as they are exposed to xenophobia, which makes them targets of violence and can limit their chances of finding employment.**

On top of this, the WHO has clearly stated that gender-based violence is a “global health problem of epidemic proportions”. Social distancing policies and mandatory quarantines, which are required to contain the spread of the virus, increase the risk of exposure to intimate partner violence. Research finds four factors, which require urgent responses, can increase the likelihood of violence against women and potentially increase femicide: 1) the increase in quantity of time shared by the perpetrator and victim; 2) the growth of daily conflicts due to family and domestic issues; 3) prolonged violence without interruption by normal daily activities such as shopping, school, family visits, work etc.; and 4) the perceived security and impunity of the perpetrator\(^{15}\).
In this context, the urgent need for a coherent and coordinated policy response led to the adoption by countries of a wide array of social and economic measures. Such measures seek to protect employment and guarantee the continuity of productive activity, and to protect income and help individuals and households deal with the crisis, especially in the most vulnerable segments of the population and those at greatest risk of loss of jobs and livelihoods.

Several economists argue that “we now have an opportunity to use this crisis as a way to understand how to do capitalism differently. This requires a rethink of what governments are for: rather than simply fixing market failures when they arise, they should move towards actively shaping and creating markets that deliver sustainable and inclusive growth. They should also ensure that partnerships with businesses involving government funds are driven by public interest, not profit.”

The feminist economy and the gender and intersectionality perspective seek to place the sustainability of life and solidarity at the centre. Thus, the integration of this perspective is necessary and urgent in the design of social measures and economic packages that respond to the crisis. This is also an opportunity to promote sustainable long-term investments for universal and resilient health systems, social protection and care systems, as well as for the development of active employment and economic recovery policies, with inclusive growth, social inclusion and environmental sustainability at the core.

In order to guarantee the integration of the gender equality and women’s empowerment perspective into policy packages in response to the COVID-19 crisis, UNDP provides the following recommendations.
Recommendations for Offer 1\textsuperscript{17}:

HEALTH SYSTEMS SUPPORT

The development of inclusive and resilient health systems demands the integration of a gender perspective, one that identifies the differentiated needs of both women and men. Gender responsive recommendations outlined below complement the tools and guidelines provided by WHO and UNDP:

- Ensure the availability of sex disaggregated data and gender analyses, including differentiated infection rates.
- Involve women in all phases of the response and in national and local decision-making processes, especially women’s groups that are impacted the most by the crisis. For example, women working in the healthcare sector.
- Guarantee that the immediate needs of women working in the healthcare sector are met and improve their access to information,
personal protective equipment and menstrual hygiene and reproductive health products.

- Guarantee as far as possible care support for children, the elderly and other dependents of women working in the healthcare sector in order to ensure they can be fully involved in the response to the COVID-19 crisis through, for instance, social solidarity schemes or innovative initiatives such as time banks.

- Develop rapid skills-building programmes to ensure women transition to formal jobs within the health and social care sectors.

- Ensure public health messages reach all women and address the needs of women based on their different roles, particularly with regard to promotion, prevention, mitigation and hygiene. Women’s organizations at the community level should be supported to ensure that messages on prevention and response strategies reach all women. It is necessary to understand women’s and men’s perceptions of the disease and the implications of these perceptions so that messaging and communications strategies can take these into account.

- Non-pharmaceutical responses, like hand washing, use of face masks or social distancing, should take into account gender considerations.

- Take measures to ease the burden of primary health care systems and ensure access to sexual and reproductive health services, including prenatal and postnatal healthcare.

- Guarantee the right to access treatment for people with immune deficiencies, such as those living with HIV. For example, ensuring that those with HIV have at least 4 months of antiretroviral treatments, preferably delivered to their homes in order to reduce the level of exposure.

- Adopt measures to prevent and mitigate sexual violence and gender-based violence associated with quarantine and social distancing, ensuring that healthcare staff have the appropriate information and skills to respond to reported situations or refer cases to specialized services.
Recommendations for Offer 2:

INCLUSIVE AND INTEGRATED CRISIS MANAGEMENT AND RESPONSE

Rapid and inclusive management of the COVID-19 crisis should be based on coordinated action and integration from different actors, sectors and levels of governance. Past experiences of crisis management during conflicts or disasters have proven that the inclusion of women’s voices and concerns in decision-making processes increases the effectiveness of the response. Furthermore, crisis management should give priority and rapid attention to people hardest hit and in positions of greatest vulnerability. Some recommendations include...
the following:

• Promote women’s leadership in policy decision-making processes associated with the response to the pandemic.

• Include women’s mechanisms (Ministries, Institutes, Commissions) in pandemic-related decision-making processes.

• Promote direct consultations, through online platforms or other remote mechanisms, with women’s community-based organizations regarding the situation of women, particularly their needs and the appropriate measures to respond to the pandemic, guaranteeing that their opinions, interests, contributions and proposals are taken into account in the response.

• Adopt crisis management measures that prioritize high risk groups, such as the elderly, people who are immunocompromised (people with HIV, malaria, tuberculosis or autoimmune diseases) or have chronic diseases (diabetes, respiratory diseases, cardiovascular problems), people living in poverty or vulnerable situations, homeless people and people deprived of liberty (particularly women), single-parent and female-headed households, and LGBTI+ living in poverty or vulnerable situations.

• Adopt measures to guarantee the continuity of distance learning services in coordination with national and sub-national authorities in the sector, guaranteeing that these services reach girls and young women.

• Guarantee the availability of childcare systems and care mechanisms, particularly for orphans and other dependents, to mitigate the effects of the pandemic.

• Ensure that migrants and refugees have access to secure facilities, especially those in border and vulnerable host communities, that can minimize the risk of contagion and situations of sexual violence and gender-based violence.

• Ensure women in state prisons and their children are in appropriate conditions and allow house arrest when necessary.

• Cross-sectoral digitization of sectors and industries with low or medium digital intensity in order to guarantee the provision of health services (e.g. telemedicine), education (e.g. certification of skills, educational institutions in remote rural or marginal
urban areas), business continuity of micro, small and medium-sized enterprises (e.g. digital invoices, technological equipment, operational digitization), etc.

- Sub-national levels are crucial in the response to the COVID-19 crisis. Coordination between national and sub-national levels that promotes a clear and coherent design of policy responses and takes into account the gender differentiated needs of women and men during the crisis should be encouraged.

- Identify and implement preventative actions in marginalized neighborhoods with scarce and deficient water, poor sanitation, and over-crowding. Take into account the differentiated impacts of the measures taken in urban and rural settings, and in areas with inadequate access to essential services.

**Gender-based violence and violence against women policies in the context of the COVID-19 outbreak**

During periods of isolation and quarantine, women can be exposed to their abuser full time. The tensions due to prolonged coexistence in the private space, combined with the uncertainty and anxiety caused by the outbreak of the new coronavirus, may increase the number of cases of violence against women and of domestic violence. The overload of domestic and care work, in addition to restrictions in the family economy, can increase tensions and violent behavior against women, children and older relatives. Violence can also affect the re-entry of women into the labor market and constrain their economic autonomy. Based on these scenarios, the following recommendations are proposed:

- Maintain core operations and health services to assist women victims of violence by ensuring that they have the right to leave their homes to seek help when necessary, even if movement restrictions are enforced.

- Guarantee that public services for victims/survivors, such as hotlines and shelters, adapt their structures to continue providing help in the context of a health emergency, guaranteeing a safe
environment for those using the service and for care providers.

- Establish or promote emergency numbers that contacted through messaging apps, reinforcing the safety of victims/survivors and protecting the health of workers during the outbreak.

- Guarantee the continuity of health services within contexts of sexual violence, such as access to abortion services (when allowed by national legislation), emergency contraception methods and post-exposure prophylaxis (PEP)\(^\text{18}\).

- Promote creative communication campaigns that ensure care for gender-based violence survivors without exposing their identities.

- Ensure the continuity of justice services when the mobility of judges and justice personnel is compromised, through digital and remote mechanisms, especially when these services are required to resolve disputes related to intimate partner violence, property settlement, custody, child support or alimony, etc.

Maintaining operations of health and protection services to help women victims of violence is essential so that they can leave their homes and seek help when necessary, even during times of quarantine or restricted movement.
Recommendations for Offer 3:

SOCIAL AND ECONOMIC IMPACT NEEDS ASSESSMENT AND RESPONSE

Specific recommendations on conducting gender sensitive impact analysis can be found elsewhere. This section of this paper seeks to set out a comprehensive view of the measures that have been taken to mitigate the crisis in different economies while highlighting the potential gendered impacts. Most of these measures apply specifically to high- or medium-income economies where governments provide a level of public service, though some are nevertheless applicable to poorer economies.

This list of measures seeks to guarantee the universality of social protection and access to basic services, while also looking at broader fiscal and monetary policies that can impact women’s employment, ability to run businesses and her family’s well-being. These measures
should be aligned to broad governmental efforts and strategies to finance the achievement of the SDGs and prevent potential setbacks in the realization of the 2030 Agenda.

**Active fiscal policy**

Measures taken by governments have been focused on alleviating the tax burden and social contributions of companies and businesses in order to try to ensure their survival. In order to target women owned businesses or areas of the economy where women tend to be employed, detailed knowledge of business ownership is needed that would allow for more responsive support to be targeted to their particular needs. Tax relief measures for individuals and families can also be included.

The following are some of the measures identified to guarantee business continuity:

- Salary supplements for micro, small and medium-sized businesses.
- Exemption of a percentage or of all social contribution payments according to the size of the company with the commitment to maintain employment.
- Staggered payments of social security contributions.
- Co-financing social security contributions of micro, small and medium-sized companies that have had to resort to laying off staff or reducing working hours.
- Temporary suspension of tax payments staggered or deferred payments of tax obligations.
- Tax exemption for the sectors hardest hit by the crisis (i.e. tourism, transport, entertainment/orange economy, etc.).

*Active gender responsive fiscal policy: gender responsive: classifying the property and size of companies, will help to identify the micro, small and medium-sized businesses that are owned by women, and ensure the support efforts respond to their specific needs.*
• Subsidies, transfers or other direct economic support to affected sectors, prioritizing those sectors that guarantee the supply of necessities and job creation.

• Where applicable, enable the use of budget surpluses from previous fiscal years for public social investment or stimulus to face the crisis.

• Reduced taxes and tariff rates on essential products and medical supplies that guarantee a continuous supply for health services, households and raw materials for productive activities.

• Control of prices of the basic food basket, as well as key health supplies (face masks, alcohol-based hand sanitizers and disinfectants) to respond to COVID-19.

Tax relief measures for individuals and families include:

• Taxes deferred or staggered payments with specific moratorium periods for the self-employed and for people who have lost their jobs or had their working hours or their contracts temporarily suspended.

• Moratoriums for the payment of social security contributions for the self-employed and for people who have lost their jobs, had their working hours reduced or their contracts temporarily suspended.

Monetary and exchange rate policy and capital markets

These measures are aimed at increasing liquidity in the economy to ensure that the financial system has the capacity to channel credit to finance the productive activity. It also includes other measures to protect businesses from speculative practices in the capital markets. Some measures identified include:

• Interest rate reductions to ensure the highest liquidity of the financial system.

• Purchases of insured mortgages to provide higher liquidity to the mortgage market.
• Broaden targeted liquidity provisions for the financial system.
• Broaden eligible collaterals.
• Purchase of bonds in the secondary market.
• Guarantees to incentivize credit operations targeted to small and medium-sized businesses.
• Guarantees or incentives to small and medium-sized farmers.
• Ban Foreign Direct Investment (FDI) in strategic industries to prevent investors from taking control.
• Ban short selling in the capital market for a determined period of time to prevent investors from betting on a decline in stock value.
• Regulatory exchange rate measures to limit the exposure to losses of importers as a consequence of exchange rate variations and the uncertainty of international capital markets.
• Broaden the discount window lending and the utilization of budget surpluses from previous fiscal years to finance national and sub-national response investment funds on social investment, health, essential services and the adoption of economic relief measures.

**Policy of financial stimulus and relief**

This includes all the financial liquidity measures to finance working capital or other targeted lending mechanisms, guarantee schemes and insurances, as well as financial relief measures to protect individual income. The inclusion of a gender perspective in financial support policies would aim to break formal and informal barriers preventing women’s access to credit and financial services, due to collaterals and physical guarantees (such as real estate property, land or equipment) and level of income.

*There must be a suspension and moratorium of credit and insurance products for people without jobs and those who have had their working hours reduced or their contracts suspended temporarily as result of the crisis.*
Measures targeting businesses:

- Payment deferral for financial obligations and re-financing schemes without affecting the initial financial conditions agreed to, for the sectors hardest hit by the crisis, especially micro, small and medium-sized businesses.

- Targeted lending mechanisms with special lines of credit with specific credit terms to finance working capital needs of sectors highly affected by the crisis. Ensuring the design of specific preferential terms for micro, small and medium-sized business, as well as differential terms for women-owned businesses.

- Subsidized interest rate programmes for micro, small and medium-sized businesses.

- State-backed guarantee programmes for loans with limited or unlimited liquidity assistance, including the coverage of financial and tax obligations.

- State-backed guarantees to cover the renewal of loans.

- Increase state-backed guarantees to reinforce liquidity of exporters.

- Finance the reduction of working hours of companies affected by the crisis through the public compensation of a percentage of the wage net loss.

- Repurpose funding lines from development finance institutions to ensure they also cover liquidity needs.

- Special lending and leasing mechanisms to finance digital and technological equipment, with preferential terms for micro, small and medium-sized businesses, to guarantee business continuity, connectivity and telecommuting arrangements.

- Special insurance schemes for the hardest hit sectors such as tourism and transport.

**Expansion or ad-hoc payments, targeted transfers or extraordinary bonuses for workers, including informal, occasional, seasonal or migrant and / or independent workers are needed.**
Financial relief measures to protect income:

- Temporary suspension of mortgage payments with specific moratorium terms for unemployed people, employees with reduced working hours or with temporary suspensions of contracts due to the crisis, as well as the self-employed. It is important to ensure that the initial conditions agreed to with financial institutions remain unchanged, additional collaterals are not requested, and additional fees are not charged.

- Measures to re-finance or re-negotiate mortgage payments for individuals and families affected by the crisis, people who have lost their jobs, employees with temporary suspensions of their contracts or reduced working hours, and the self-employed.

- Temporary suspension of loan and insurance payments, with specific moratorium terms, for individuals and families affected by the crisis, people who have lost their jobs, employees with temporary suspensions of their contracts or reduced working hours, and the self-employed.

- Ensure that people with re-financed payments and those included in moratorium terms are not reported to credit bureaus.

**Social protection policy**

These measures include those aimed at extending social protection policies, ensuring cash transfers, subsidies and pensions, as well as social security schemes addressing the most vulnerable populations, such as the elderly, informal workers, remunerated domestic workers, families in poverty or at high risk of falling back into poverty with dependent family members. Some measures include the following:

*Ensure that employment policies promoted for the private sector are also extended to informal workers and paid domestic workers in particular.*
• Extension of conditional cash Transfers (CCT) to people living in poverty or at risk of falling back into poverty, or those performing informal economic activities.

• Extension of coverage of non-contributory pensions for the elderly.

• Increase of bonuses for minimum contributory pension for the elderly.

• Guarantee the right to access pensions even when the qualifying time has been affected by temporary suspension of contracts or working day reductions.

• Broaden food policies targeting primarily the elderly, pregnant women, girls and boys and youth.

• Extension or increase of ad-hoc targeted payments, bonuses and targeted cash transfers for workers, primarily informal, casual, seasonal and migrant workers and the self-employed.

• Extension of coverage of unemployment insurance schemes, ensuring access even when the minimum qualifying time has not been reached.

• Guarantee of universal paid sick leave for all employees.

• Extension of social aid packages primarily in marginalized urban areas.

• Vouchers for food and essentials purchases for families.

**Employment policies**

This includes measures aimed at protecting and supporting labor demand and retaining employment (such as reduced working hours, paid leave and other subsidies), as well as policies targeting the informal sector. Some measures include the following:

• Extension of employment policies targeting initially the formal sector to also cover informal workers in general and domestic workers in particular\(^{19}\).

• Promote employment retention schemes, including short-time work arrangements.
• Develop unemployment benefits and other time-bound support schemes for businesses, such as wage subsidies.

• Subsidized and temporary tax relief schemes on payrolls and staggered or temporary suspension of social security contributions.

• Provision of paid leave and extension of entitlements of workers, subsidies and other related schemes.

• Promote the retention of the gig economy as well as an online platform for jobs (due to social distancing policies) and decent work.

• Minimum wage policies. In Latin America and the Caribbean the gender wage gap is driven by gender pay gaps at the bottom of the pyramid of wage distribution. A well-designed minimum wage policy has important implications to the overall wage policy, since it works as an effective wage floor, in particular for remunerated domestic workers.

• Non-deductible time-bound state-backed guarantees of paid leave.

• Public employment schemes as part of more comprehensive recovery packages for, during or after the pandemic, based on training and rapid skills-building programmes. These schemes promote the rapid generation of income of low-income women and are based on infrastructure development as well as the provision of health, care and other social services.

• Development of programmes to stimulate labor demand, based on benefits targeting businesses and state-owned enterprises in order to retain female workers and promote the inclusion of women. Also public procurement programmes targeting women-owned businesses.

**Licensing and care policies for children and/or other sick relatives tend to mitigate the effects of the demands of paid and unpaid work.**
Care policies and shared responsibility

These measures are aimed at recognizing, reducing and redistributing the burden of unpaid care work that is primarily done by women as primary caregivers as a consequence of caring for patients at home, school closures, care of the elderly, social distancing measures and mandatory quarantines. Some measures include the following:

- Public care services: Set of measures to relieve the burden of care work on women, including in public childcare and care mechanisms for other dependents.

- Additional bonuses, subsidies and vouchers to hire childcare services for workers unable to telecommute.

- Leave policies to take care of children, the sick and other dependents to help to mitigate the effects of the overload of paid and unpaid work. In a region with a wide informal sector and within the context of the COVID-19 outbreak, these tools should be extended to informal workers. Consequently, broader coverage and support to economic business activity will require public contributions.

- Development of community-based time banks aimed at donating time for the care of others.

- Communication campaigns for the promotion of shared responsibility of parenting, domestic chores and care work within the households.

_In a region with an extended informal sector and in the context of the COVID-19 outbreak, expanding the coverage of the instruments suggested in this briefing note to informal workers, through state disbursements as well as providing support to the private sector, is vital._
Policies to guarantee access to essential services

• Ensure the provision of essential services such as water, electricity and gas to families unable to pay the bills, as well as the provision of other services to guarantee digital and internet connectivity, teleworking and other remote working modalities.

• Time-bound suspension of payments for essential services such as electricity, gas and water to highly vulnerable families and groups.

• Reconnect suspended essential services such as water, electricity and gas to the most vulnerable families and groups.

• Extend the coverage of essential services such as water, electricity and gas in highly vulnerable and marginalized areas.

• Freeze tariffs for essential basic services such as water, electricity and gas.

Within the context of the COVID-19 emergency, migrant and refugee women are in particularly precarious situations as they are exposed to xenophobia, which makes them targets of violence and limits their chances of finding fair employment.
NOTES

1. Prepared by the UNDP Gender Area for Latin America and the Caribbean based on recommendations made by UNDP and other UNS Agencies (WHO, UN Women, ILO, UNCTAD), IFIS, and research on responses in health emergencies, as well such as the current anti-cyclical packages of economic measures put in place by the countries until March 26, 2020. This briefing note was reviewed by the Gender Team, HIV and Health and the Inclusive Growth and Development RBLAC clusters, as well as by Argentina, Chile and Costa Rica UNDP Country Offices.

2. ILO estimates that 58.6 percent of employed women work in the service sector worldwide, compared to 45.4 percent of men. Women also have less access to social protection and will have a disproportionate burden on care responsibilities, in the case of school closure or care facilities (ILO, 2018).

3. The virus is the SARS-CoV-2: Severe Acute Respiratory Syndrome Coronavirus 2.

4. During the Ebola EVD crisis from 2012 to 2014, 11,310 people died. The women had a greater exposure to the disease attributed to nursing patients at home and also to the tasks of preparing the deceased in preparation of ritual funerals, exposing them to a greater extent to bodily fluids and other transmission vectors. For their part, men were more exposed to the disease due to their livestock care responsibilities and the time they spend away from home. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5635524/pdf/40249_2017_Article_346.pdf

5. EVD Ebola Virus Disease / MERS Middle East Respiratory Syndrome / SARS Severe Acute Respiratory Syndrome / H1N1 Influenza A (H1N1). For more information please visit: https://www.who.int/


8. https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30526-2/fulltext

9. It is documented that during the 2014-2016 Ebola outbreak in West Africa that fears of contracting the disease resulted in fewer women attending health services. Davies & Bennett, “A Gendered Human Rights Analysis,” International Affairs Davies & Bennett...

10. WHO (2019). Gender equity in the health work force: Analysis of 104 countries

11. Female-headed households are more likely to have inadequate shelter than male-headed households. An inadequate shelter increases the risk of illness and disease by 25 percent throughout a person’s life, while overcrowded conditions in the shelter can greatly increase the spread of infectious diseases. InterAction, “The Wider Impacts Of Humanitarian Shelter And Settlements Assistance,” InterAction.

12. “The greater presence of boys and girls in poor households causes an extra burden of care work for women in these households, which in turn prevents their possibilities of having a greater participation in the labor market. As data from nine countries in the region show, the main barrier to the full inclusion of women in the labor market is domestic and care work”. (ECLAC, 2019:143)


15. https://miguelorenteautopsia.wordpress.com/2020/03/16/confinamiento-y-violencia/amp/?__twitter_impression=true


17. Recommendations based on the document prepared by UN Women for the region https://lac.unwomen.org/es/digiteca/publicaciones/2020/03/covid-como-incorporar-a-las-mujeres-y-la-igualdad-de-genero-en-la-gestion-de-respuesta


20. In Latin America, the gender wage gap is mainly driven by wage gaps at the lower level of the wage distribution. This has important salary policy implications as a well-conceived minimum wage policy with broad legal coverage and improved compliance with the minimum wage could reduce the wage gap between men and women. (ILO 2019)

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