



## Brief | Gender Equality and Social Inclusion indicators (GESI indicators) for COVID-19 impacts and response

**This Brief provides useful Gender Equality and Social Inclusion (GESI) indicators to help people working in government ministries, private sector, civil society organisations (CSOs) and other agencies to best plan, monitor, analyse and report on COVID-19 response and impacts. The impacts of COVID-19 are experienced differently by women and men. COVID-19 responses and assistance will also benefit women and men differently. Given these differences, to properly monitor the impacts of the COVID-19 response, it is important to use data that is disaggregated by sex, age and abilities. Gender and social analysis is also important.**

The COVID-19 pandemic has impacts beyond people's health that affect different aspects of day-to-day life. All people will be impacted in some way and must adapt to the pandemic, however men and women – or different groups of men and women – will not all be affected in the same ways. This is due to women and men play different roles and have different responsibilities in their homes and communities. As such they may have different needs and require different types of support or services. Although to-date many Pacific countries have not had confirmed cases of COVID-19 the pandemic is still having an impact on the lives of women, men, girls and boys. Examples of impacts caused by lockdowns and school closures include general stress, increased workloads within households, food shortages and economic insecurity. These impacts may in turn result in increased domestic violence or child abuse and have negative impacts on health due to limited availability or restricted access to health services. Marginalised groups may also become more vulnerable to illness, neglect or violence due to COVID-19 prevention measures.

Women and girls are disproportionately impacted by crises. Women and girls are likely to: face even higher rates of domestic violence and sexual abuse; are more vulnerable to economic hardship as income generation activities women perform are disrupted; have increased unpaid in the household due to the closure of schools and have reduced access to essential health services.

Some countries are reporting a three-fold increase in domestic violence related calls<sup>1</sup> in locations where COVID-19 policies require people to self-isolate and restrict their movement. This increase is consistent with international evidence that during a disaster period violence against women escalates by 50 to 400 per cent<sup>2</sup>. Marginalised groups such as people with disabilities, elderly people, migrants and people of diverse sexual orientation, gender identity and expression (SOGIE) also face multiple vulnerabilities during COVID-19, from a heightened risk of infection through to neglect and violence.

It is important to keep track of how all the different segments of the population are being affected by the COVID-19 pandemic and how mitigation measures are affecting people's lives. This set of indicators has been developed to assist with that purpose.

### Indicators

This Brief provides an overview of useful indicators that can help guide the collection and analysis of information, ensuring the inclusion of gender equality and social inclusion considerations. These are indicators that a government ministry, civil society or other organisations may find useful to monitor, and report on COVID-19 response and impacts.

This Brief is complemented by an Excel spread sheet, which serves as a template for data collection and analysis. The Excel spread sheet has simple instructions and is easy to complete. There are also several useful resources on the [Pacific Women website](#). These are intended to support institutions to develop



COVID-19 response strategies that are gender responsive and socially inclusive to address the needs of women, youth, people with disabilities and other segments of the population who are more vulnerable.

The list of indicators is not mandatory nor exhaustive but, hopefully, helpful for people needing to track COVID-19 responses and impacts. The indicators cover seven areas:

1. Health impacts of the COVID-19 pandemic
2. Participation of women, youth, and people with disability in decision-making
3. Sexual and reproductive health
4. Domestic violence
5. Economic security
6. Food security
7. Unpaid care work

*Note: It is important to acknowledge that many institutions and government ministries may not have all the suggested 'pre-crisis' data needed for 'before and after' comparisons. However, this should not deter the collection of data to monitor the current impacts of COVID-19. For example, if data is unavailable about farming or fishing activities performed by women before a country's COVID-19 response began, it is still important to collect data on current activities to help inform responses to COVID-19.*

## 1. Health impacts of the COVID-19 pandemic

**Objective:** Assess the direct impacts of COVID-19.

1. Number of people tested (by sex, age and disability).
2. Number of people who have contracted COVID-19 (by sex, age and disability).
3. Number of deaths (by sex, age and disability).
4. Number of health workers (by sex and age).
5. Number of health workers with adequate protection against COVID-19 (by sex and age).<sup>3</sup>
6. Number of health workers who have contracted COVID-19 (by sex and age).
7. Approximate number of people (by sex, age and disability) who do not or cannot comply with the social distancing measures.
8. Approximate number of people (by sex, age and disability) who do not have sufficient WASH infrastructure to comply with hygienic measures to prevent COVID-19.

## 2. Participation of women, youth, and people with disabilities involved in decision-making

**Objective:** Assess and monitor women's participation in decision-making related to the COVID-19 response.

9. Number of people (by sex, age and disability) involved in the COVID-19 pandemic response's agencies and committees.
10. Involvement of the departments of women, disability and youth, across the COVID-19 response's agencies and committees.
11. Involvement of women-led, youth-led and disability-led CSOs involved in consultations in the design of responses to the COVID-19 pandemic.
12. Number of women-led, youth-led and disability-led CSOs delivering services to communities/population during the COVID-19 pandemic.

### 3. Sexual and reproductive health

*Objective:* Assess if and how the impacts of the COVID-19 pandemic affect women's access to sexual and reproductive health services.

13. Number of people (by sex, age and disability) accessing information and/or services on sexual and reproductive health **before** and **during** the COVID-19 pandemic.<sup>4</sup>
14. Number of people (by sex, age and disability) accessing contraceptives **before** and **during** the COVID-19 pandemic.
15. Number of women giving birth in hospitals and clinics **before** and **during** the COVID-19 pandemic.

### 4. Domestic violence

*Objective:* Monitor the incidence of domestic violence and assess the access to services during the COVID-19 pandemic by survivors, also referred to as victims.

16. Number of victims by sex, age and disability treated by health services for injuries possibly due to domestic violence **before** and **during** the COVID-19 pandemic.<sup>5</sup>
17. Number of interventions by the police related to domestic violence **before** and **during** the COVID-19 pandemic (with data disaggregated by sex, age and disability of the survivors).
18. Number of official complaints to the police related to domestic violence **before** and **during** the COVID-19 pandemic (by sex, age and disability of the complainants).
19. Number of survivors accessing services from crisis centres **before** and **during** the COVID-19 pandemic (by sex, age and disability).
20. Number of COVID-19 responses by sector inclusive of services related to domestic violence and child protection (such as from ministries of health, police, justice, disaster response and others).

### 5. Economic security

*Objective:* Assess and monitor impacts of the COVID-19 pandemic on women's and men's economic security.

21. Number of people (by sex and age) who lost their job or source of incomes due to the COVID-19 pandemic.
22. Number of people (by sex and age) who are temporarily unemployed due to the COVID-19 pandemic.
23. Number of business owners (by sex and age) who closed their business or stopped their activity due to the COVID-19 pandemic.
24. Percentage of lost income (by sex, age and disability) due to the COVID-19 pandemic.
25. Percentage of lost income by handicraft producers (by sex and age) due to the COVID-19 pandemic.
26. Percentage of lost income by market vendors (by sex and age) due to the COVID-19 pandemic.
27. Percentage reduction of remittances by household since the beginning of the COVID-19 pandemic.
28. Number of economic response initiatives targeting sectors/employment in which women are involved including number of initiatives addressing women's loss of income due to the COVID-19 pandemic.
29. Number of people (by sex, age and disability) who directly benefit from economic response initiatives.

## 6. Food security

*Objective:* Assess and monitor impacts of the COVID-19 pandemic on food security activities performed by women and men.

30. Activities for household consumption performed by women and by men in agriculture and fisheries **before** and **during** the COVID-19 pandemic.
31. Number of hours dedicated to agriculture and fisheries by women and by men **before** and **during** the COVID-19 pandemic.
32. Food purchased at the local store that is no longer available or available in limited quantity since the beginning of the COVID-19 pandemic.
33. Increases in the price of food (rice, flour, sugar, others basic) since the beginning of the COVID-19 pandemic.
34. Number of COVID-19 response initiatives related to food security targeting activities performed by women.

## 7. Unpaid care work

*Objective:* Assess and monitor the impact of the COVID-19 pandemic on the (re)distribution of unpaid care work.

35. Number of children who stopped going to school due the COVID-19 pandemic (many schools are being closed) aged 5 to 10; and 10 to 15.
36. Number of hours a day dedicated to unpaid care work performed by women and girls and by men and boys **before** and **during** the COVID-19 pandemic.<sup>6 7</sup>
37. Number of hours a week dedicated to activities for the communities (such as attending community meetings, organising events, other activities) performed by women and by men before and during COVID-19.
38. Number of response initiatives aimed at improving the conditions to perform unpaid care work, including mitigating increased number of hours dedicated to unpaid care work due to the COVID-19 pandemic.

## References

<sup>1</sup> The Guardian, March 2020, Lockdowns around the world bring rise in domestic violence:

<https://www.theguardian.com/society/2020/mar/28/lockdowns-world-rise-domestic-violence>

<sup>2</sup> Australian Disaster Resilience Knowledge Hub, 2013, The hidden disaster: domestic violence in the aftermath of natural disaster.

<https://knowledge.aidr.org.au/resources/ajem-apr-2013-the-hidden-disaster-domestic-violence-in-the-aftermath-of-natural-disaster/>

<sup>3</sup> Adequate protection according to the World Health Organisation standards.

<sup>4</sup> The “before” and “after” threshold will vary from one country to another. “Before” corresponds to the date before the government adopted robust measures to contain the COVID-19 pandemic. For example, in Tuvalu, the government implemented measures to prevent COVID-19 in February, but declare the state of emergency on the 20<sup>th</sup> of March with a set of measures including the country’s lockdown, the closing of schools, etc. Therefore, the 20<sup>th</sup> of March is the threshold to determine “before” the COVID-19 pandemic measures and “after”.

<sup>5</sup> The collection of data disaggregated by sex, age, and disability is important to identify which segments of the population are affected or more at risk. However, in all cases, disaggregated data must not be publicly available if they support the identification of the survivors.

<sup>6</sup> The Guardian, March 2020, Lockdowns around the world bring rise in domestic violence:

<https://www.theguardian.com/society/2020/mar/28/lockdowns-world-rise-domestic-violence>

<sup>7</sup> Care activities include activities such as feeding a baby, nursing a sick partner, helping an older person to take a bath, carrying out health check-ups or teaching young children, cleaning, cooking, doing the laundry and other household maintenance tasks. (International Labour Organisation. 2018. Care work and care jobs for the future of decent work. Geneva: ILO, 2018)