

When Returning to Normal Doesn't Work for Half the World's Population:

How to Build Back Better



The time immediately following a crisis, whether it be a peace process, rebuilding after a natural disaster or seeing a new government come into power, creates a window of opportunity to reimagine what the next phase of life can look like. When the status quo has been upended, there is a feeling that “normal” can be redesigned. With COVID-19, this opportunity seems more pressing than ever before as the pandemic has highlighted the inequalities that have made the “old normal” not work for so many, particularly women. In every country, women face gender discrimination and often times, this intersects with other forms of inequity stemming from disability, race, ethnicity, or sexual orientation, creating additional barriers for accessing services, education, and employment. The surging Black Lives Matter movement around the globe has thrown into stark relief just how critically important it is, especially for women, and particularly women of color, that we do not just get back to “normal,” but that we actively build back better.

For women and girls living in humanitarian contexts, building back better—and taking into account multiple factors of oppression and discrimination—is critical. Through the **International Rescue Committee's (IRC)** nearly 90 years of humanitarian work, we know that women and girls continue to be disadvantaged in terms of access to education, employment, healthcare, safety, and more. COVID-19 has brought increased rhetoric around the different ways women and girls experience a crisis, yet we are still seeing old patterns being repeated, particularly in the absence of gender analysis, disaggregated data, and dedicated funding to support the most vulnerable, despite high-level calls to action. As countries begin to reopen, we cannot sacrifice the necessary changes for the comfort of the familiar. The time is far past to have difficult conversations, to **employ feminist approaches**, and to use COVID-19, as terrible as it continues to be, as an opportunity to truly change the status quo for all women and girls.

COVER: At the border of Colombia and Venezuela, patients wait for medical services at the Attention Center for Migrants.

BOTTOM: IRC specialist Sohalia Khaliqi provides key hygiene information to families in Herat province, Afghanistan.





TOP: Maryan, an IRC community health worker, has assisted thousands of children in Koren District.



BOTTOM: South Sudanese girls join in activities at the IRC's Women and Girls Safe Space in Bombassi Refugee Camp, Ethiopia.

Here are Five Things We Must Do to Build Back Better:

1. Have Women at Every Table, Every Time.

We know that when **women are at the table** during the peace negotiation processes that the resulting agreements are more likely to include better outcomes for women. A recent analysis found that the percentage of women on the United State's COVID-19 national response team was 8.7%. In Brazil, that number shrinks to 3.7%. To ensure that the needs of women and girls are included within rebuilding plans, they need to have active roles in the process. This can be done through the pressure applied by women's groups and civil society on governments, employees demanding better policies from employers, calling elected officials, and even looking for ways to ensure better inclusion within your own communities. Women must be at every table with equal voice and decision-making power. All issues are women's issues and women from a diverse set of backgrounds have a right to be heard. In humanitarian settings, this means that refugee women and local women-led organizations must be at decision-making tables with acknowledgement of unequal power dynamics that exist because of the colonial and racist history of humanitarianism as well as the fact of who holds the purse-strings. Those who historically have more power must step back, listen and respond, and be held accountable for doing so.

2. Match Rhetoric with Money. Before the COVID-19 pandemic, **over 1 in 3 women** experienced gender-based violence (GBV) in their lifetimes. During lockdowns and quarantine measures, the number of women and girls facing violence in their homes is skyrocketing, leading the UN Secretary General to call for a **worldwide ceasefire of domestic violence**. Over 100 countries signed on to this ceasefire. And yet, if you look through the fine print of the \$6.7 billion appeal, surprisingly little is being requested for GBV programming, and even less is actually being allocated for it. An analysis of the line items finds that only 0.68% of the overall budget requested is for GBV; according to the United Nations Officer for Coordination of Humanitarian Affairs. That percentage is incredibly small, but sadly not surprising. An **IRC analysis** from 2016 to 2018 found that only .12% of global aid went to GBV. Money means commitment, so if we want to see change happen, we need to see GBV prevention and response prioritized as an objective of every response effort, with enough funding allocations for GBV programming to actually meet the need. This must happen within a wider funding conversation whereby we know how much funding is required for gender equality and women's empowerment and then actually meet those needs, neither of which is **happening now**.



3. Count Women. If data is not collected on the different experiences of women and girls, we cannot possibly budget for, or effectively design, recovery efforts that are responsive to the needs of women and girls. While men are suffering **higher mortality rates** from COVID-19 than women, we know women are more likely to be exposed to the virus given their traditional caregiving roles and participation in the healthcare workforce. While the global average denotes that 51% of cases are male, in places like Somalia, Pakistan and Yemen, cases are **more than 70% male**. This could point to gender discrepancies in COVID-19 testing and treatment, with women potentially being left out of testing and their health needs deprioritized. The unequal access to healthcare that women face continues to play out due to discriminatory norms, which have been further compounded by the global pandemic. As work on treatment and vaccines are underway, it is critical that women are equally represented in research and trials, and that their everyday experiences are counted. Beyond the obvious health-related data needs, we also need to make sure collecting gender-disaggregated data becomes standard practice across all sectors. We can no longer afford to see gender data as a “nice to have” element of humanitarian response; if we are serious about gender equality, responding to the needs of women and girls, and tackling the barriers they face to accessing services, it is a necessity.

IRC Colombia takes measures to mitigate the risk of COVID-19 contagion.

4. Recognize that Sexual and Reproductive Health Services are Essential. The needs of women and adolescent girls do not suddenly stop during an emergency. During the **Ebola outbreaks** in the DRC and across West Africa, we saw an increase in maternal and newborn mortality—largely due to the disruption of sexual and reproductive health services. Sexual and reproductive health services including access to contraceptive methods and respectful maternity care - are essential and often life-saving services that need to be made easily accessible, safe, and open to all women and girls, regardless of where they live. As resources continue to be funneled to COVID-specific health responses, attention needs to be paid to not only prevent any roll backs to sexual and reproductive health services, but to also expand them at a time when women and girls need them most. Similarly, women do not stop facing violence because of a pandemic—in fact, COVID-19 and its mitigation efforts have led to **increases in violence against women and girls**. GBV response and prevention are lifesaving and essential services that must be continued.

5. Refuse to Leave Women and Girls Behind. The grave economic impacts women are facing must not be ignored. Women are already experiencing **higher rates of job loss** than men as they hold the majority of jobs within heavily-impacted sectors such as those within retail, the service industry, education, and more. Women affected by conflict and displacement are more likely to be in informal employment and **without access to social protection**, as they face additional **legal barriers to work**. Women have also been **forced to drop out** of the workforce to take care of children and other family members in need, leading to concern about the erasure of previous labor force gains. As governments begin to reopen economies, it is imperative that tailored livelihood programs and services are created to take into account the needs of women.

Additionally, as more and more children stay out of school for prolonged periods of time, we run the risk of not only developmental gaps, but the fact that many girls may not return to school at all. It is predicted that 10 million more **secondary school-aged girls will not return to school** due to COVID, yet we know that when girls do get an education, they are more likely to lead healthy, productive lives; earn higher incomes; participate in household decisions; and **create better futures** for themselves and their families. When gender stereotypes collide with economic distress, it is women and girls who suffer. Provisions must be made now to ensure attending school and participating in the workforce work for the majority. Reentering society cannot leave anyone behind nor can it be designed on past structures that make it easier for women and girls to stay back.

COVID-19 has completely changed the world as we know it. As we grapple with large-scale loss, economic challenges, and isolation, it is important to look ahead at the opportunities for women and girls. We must build back better by taking an intersectional feminist approach throughout the COVID-19 pandemic and as we look forward to achieving the Sustainable Development Goals, achieving the promise of the Beijing Declaration and beyond. The time is now to break down past thinking patterns and old structures.



Children play at Safe Healing and Learning Space in Deh Surkh, Qala-e-Naw.