



GUIDANCE NOTE

UN COVID-19 RESPONSE & RECOVERY FUND GENDER EQUALITY MARKER



**COVID-19
RESPONSE**

ACKNOWLEDGEMENTS

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ACRONYMS

COVID-19 MPTF	UN COVID-19 Response and Recovery Multi-Partnership Trust Fund
GEM	Gender Equality Marker
GEEW/G	Gender Equality and the Empowerment of Women and Girls
GEWE	Gender Equality and Women's Empowerment
M&E	Monitoring and Evaluation
SDGs	Sustainable Development Goals
UNCT	United Nations Country Team

¹ FAO, ILO, IOM, UNDP, UNFPA, UN-Habitat, UNICEF, UNODC, UN Women, WHO and WFP.

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1. INTRODUCTION

In April 2020, the Secretary-General warned that the COVID-19 pandemic is deepening already existing inequalities and is having devastating social and economic consequences for women and girls, threatening to reverse the limited but important progress made on gender equality and women's rights. Established on 3 April 2020, the United Nations COVID-19 Response and Recovery Multi-Partner Trust Fund (COVID-19 MPTF) aims to support programmatic responses that recognise the disproportionate burden of this pandemic on women and children.²

The Terms of Reference of the COVID-19 MPTF stipulate that funded initiatives need to address the gender implications of COVID-19 and design tailored actions to avoid gender-based discrimination.³ This includes supporting gender approaches that respond to the heavy burden the pandemic has placed on women, such as heightened exposure to domestic violence, loss of livelihoods, and rising rates of unpaid labour.⁴

The COVID-19 MPTF works to make sure its entire portfolio is gender mainstreamed. To aid this process, the COVID-19 MPTF introduced a gender equality marker in April 2020 as a monitoring and accountability framework to ensure the application of high standards on gender equality, promoting both dedicated targeted interventions and gender mainstreamed programming. The COVID-19 MPTF is based on the 4-point coding and definitions of the UNCT gender equality marker⁵:

- **Gender Equality Marker 3** for programmes that have gender equality and empowerment of women and girls (GEEW/G) as the principal objective.
- **Gender Equality Marker 2** for programmes that have GEEW/G as a significant objective.
- **Gender Equality Marker 1** for programmes that contribute to GEEW/G in a limited way.
- **Gender Equality Marker 0** for programmes that are not expected to contribute to GEEW/G.

The COVID-19 MPTF gender equality marker coding is informed by the extent to which gender considerations are integrated across key components of submissions, including the situation analysis, theory of change, target population description, definition of implementing partners, risk analysis, results framework, selected SDG focus, and proposed budget.

This Guidance Note provides an overview of the gender equality marker and its application for the COVID-19 MPTF. It offers a checklist of minimum criteria, as well as tips and good practice examples to support gender mainstreaming throughout proposals and ensure applicant UN organizations accurately apply gender equality marker codes in their submission.



² Secretary-General's UN COVID-19 Response and Recovery Fund, Trust Fund Fact Sheet. March 2020.

³ <http://mptf.undp.org/document/download/23806>

⁴ <http://mptf.undp.org/factsheet/fund/COV00>

⁵ [UNSDG. UNCT Gender Equality Marker Guidance Note \(2019\).](#)

2. COVID-19 MPTF FINANCIAL BENCHMARKS FOR GENDER EQUALITY

Recent years have seen growing interest in and demands for systems that can track investments in gender equality and empowerment of women and girls (GEEW/G). While it is acknowledged that on their own gender equality markers do not increase allocations to GEEW/G it is accepted that gender equality markers can prompt action and support increased investments.

In 2018, the Secretary-General established a High-Level Task Force on Financing for Gender Equality to review and track UN budgets and expenditures across the system. The recommendations of the Task Force include the integration of gender as a criterion into the design, selection, implementation and monitoring of pooled funds and establishment of minimum financial targets for these mechanisms.

Through the gender equality marker, the COVID-19 MPTF tracks the proportion of funding focused on advancing gender equality and empowerment of women and girls, and information about individual projects/programmes focused on GEEW/G.

Consistent with the view that only programmes/projects with a strong gender lens can be effective in addressing the socioeconomic needs created by the COVID-19 pandemic, the COVID-19 MPTF has established a financial target of 30% (USD 6 million) of the current funding available (USD 20 million) through the second, interim Call For Proposals to be allocated to programmes that have identified gender equality as the principal objective (i.e., proposals with an overall gender equality marker code of 3). The COVID-19 MPTF does not approve proposals with a gender equality marker code of 0 and discourages interventions with a gender equality marker code of 1.

Table 2: COVID-19 MPTF gender equality financial benchmark for the 2nd, interim Call for Proposals (CFP)

UNCT GENDER EQUALITY MARKER CODING	DEFINITION	FINANCIAL BENCHMARK FOR 2 ND INTERIM CFP (PROPORTION OF TOTAL AVAILABLE FUNDING ALLOCATED BY GEM CODE)
3	Gender equality/women's empowerment is the principal objective	30%

3. HOW THE COVID-19 MPTF GEM WORKS AND WHO DOES WHAT

- The gender equality marker is **mandatory** for all programmes funded by the COVID-19 MPTF.
- Applicant UN Organizations assess their submissions according to the gender equality marker criteria outlined in this Guidance Note and propose a code between 0 and 3 for their joint programme when submitting their Concept Note and Full Proposals to the COVID-19 MPTF.

- ☑ Concept Notes and Proposals that do not assign a gender equality marker code will be returned.
- ☑ At the Concept Note review stage, the Fund Secretariat with the support of UN Women reviews the self-assessed gender equality marker, where necessary making recommendations to strengthen the integration of gender equality considerations and to provide quality assurance on the application of the gender equality marker coding.
- ☑ The Designate of the Secretary-General for the COVID-19 MPTF in consultation with the Advisory Committee makes recommendations on Concept Note approvals and invites UNCTs of approved Concept Notes to submit fully-fledged proposals, sharing the recommendations developed to strengthen integration of gender equality considerations and to ensure accurate gender equality marker coding.
- ☑ Based on the recommendations, applicant UN Organizations prepare their fully-fledged proposals, making adjustments to strengthen the integration of gender equality considerations and to ensure accurate gender equality marker scoring in their submissions.
- ☑ Upon receipt of the full proposals, the Advisory Committee with the support of UN Women verifies that necessary adjustments have been made and gender equality marker coding is accurate and consistent across all proposals.

Quality assurance and technical support on the gender equality marker: Accurate coding is often a challenge when applying gender equality markers.⁶ Throughout the concept note and proposal development process, the UNCT GEM Helpdesk (UNCT-GEM.helpdesk@unwomen.org) is available to provide quality assurance on gender equality marker coding and related guidance on the integration of gender equality considerations across proposal elements.

Quality assurance and technical support to the integration of gender equality considerations: At global level, an inter-agency task force comprised of currently 9 UN entities⁷ is available throughout proposal development to provide technical advice and guidance to country teams on GEEW/G integration (GEWE.C19MPTF@unwomen.org). At country and regional levels, where they exist, interagency mechanisms responsible for gender equality and the empowerment of women/girls (GEEW/G) may also be of help to applicant UN organizations and provide backstopping on gender equality marker coding and technical advice on integrating gender equality considerations within proposals. (See also Annex 3: Frequently Asked Questions; and Annex 4: Resources).

Global helpdesk to support application of gender equality marker

UNCT-GEM.helpdesk@unwomen.org

Global Inter-Agency GEWE Task Force for provision of technical advice and support on GEEW/G

GEWE.C19MPTF@unwomen.org

⁶ UN system-wide guidance on gender equality markers notes that quality assurance goes hand-in-hand with having effective quality control mechanisms, which should be a combination of quality assurance and verification, as well as external oversight or peer reviews. UN System Chief Executives Board for Coordination, Finance and Budget Network. [Quality Assurance of Gender Equality Markers Guidance Note](#) (2018).

⁷ ILO, IOM, UNCTAD, UNDP, UNFPA, UNICEF, UN Women, WFP, and WHO.

4. COVID-19 MPTF GEM CODING CRITERIA

Table 3. COVID-19 MPTF gender equality marker coding criteria across proposal components

GENDER EQUALITY MARKER CODE	CRITERIA FOR GENDER EQUALITY MARKER CODING - SUMMARY							
	Analysis	Theory of Change	Target Populations	Implementing Partners	Risk Analysis	Results Framework	SDG Focus	Budget ⁸
3	Substantive gender analysis of the socio-economic impact and implications of COVID-19, and systematic efforts to utilize sex and age disaggregated data	Clearly articulated causal link chain on how programming efforts will lead to greater GEEW/G in the context of COVID-19	Gender specific target groups are clearly identified, and/or criteria included for selection	Implementing partners mainly comprise GEEW/G specific organizations and/or relevant government counterparts	Articulates a Do-No-Harm approach <u>and</u> includes analysis of gender-specific risks and mitigation strategies	Gender-specific indicators included across Results Framework to track gender specific outcomes/impact	SDG 5 selected as a main goal of the programme	80 – 100% of the budget is allocated to GEEW/G
2	Gender analysis of the socio-economic impact and implications of COVID-19, with some effort to utilize sex and/or age disaggregated data	Articulates how progress in GEEW/G will come about as a result of programming efforts	Distinct needs and capacities of men, women, girls and boys are reflected in the identification of target groups	Implementing partners include GEEW/G specific organizations and/or relevant government counterparts	Articulates Do-No-Harm principles/ approaches	At least one outcome level gender-specific indicator AND/OR at least one gender specific output-level indicator per outcome area	SDG 5 is selected as a secondary SDG goal of the programme	30 – 79% of the budget is allocated to GEEW/G
1	Mentions women/girls and gender but no substantive gender analysis; limited use of disaggregated data	Unclear as to how programme approaches or methods will contribute to GEEW/G outcomes/outputs but some evidence of a gender-sensitive approach	Mentions women/ girls but among other groups and no specific criteria is included for their selection	Implementing partners include very few/no GEEW/G specific organizations or relevant government counterparts	Do-No-Harm principles/approaches are implied but not clearly explained	Some indicators are sex disaggregated; no gender-sensitive indicators	SDG 5 is selected as a contributing SDG goal of the programme	15 – 29% of the budget is allocated to GEEW/G
0	No consideration of gender inequalities in the analysis; gender neutral language and lack of disaggregated data to inform analysis presented	No reference to how programme approaches or methods will contribute to GEEW/G outcomes/ outputs and no evidence of a gender-sensitive approach	Women/girls are not identified as a specific target population and no specific criteria are included for their selection	Implementing partners include no GEEW/G specific organizations or relevant government counterparts	No articulation of Do-No-Harm or gender sensitive approaches	No sex disaggregated indicators; no gender sensitive indicators	SDG 5 is not identified as a main, secondary or contributing SDG goal	Less than 15% of the budget is allocated to GEEW/G

⁸ Proportion of proposal budget allocated to GEEW/G per gender equality marker code is based on the Peacebuilding Fund Guidance Note on Gender Marker Scoring (2019).

5. COVID-19 MPTF GEM CODING CRITERIA CHECKLISTS

The tables below provide detailed guidance for applicants when assigning a gender equality marker score to their concept notes and proposals. They are meant to clarify the difference between the gender equality markers in terms of how gender equality and the empowerment of women/girls is addressed in the various elements of the submission. The applicant is to use this as a 'check-list' to review and compare the concept note/proposal against and allocate a gender equality marker code or make the necessary changes to reach the desired marker.

GENDER EQUALITY MARKER CODE (3) <i>The principle purpose of the intervention is to advance gender equality and the empowerment of women and/or girls (GEEW/G) in the context of the crisis caused by COVID-19. Gender equality is fundamental to the proposal design and expected results. The intervention would not have been undertaken without the gender equality objective.</i>	
Analysis of socio-economic impact and implications of COVID-19	<input checked="" type="checkbox"/> Includes substantive gender analysis of the impact and implications of COVID-19 on different groups of women, girls and/or men and boys in the country, with reference to those most at risk of being left behind. Systematic effort to support analysis with disaggregated data, including by sex and age.
What is the specific need/ problem the intervention seeks to address?	<input checked="" type="checkbox"/> The needs/problem analysis highlights the specific needs and capacities of women, girls, men and boys affected by COVID-19 and the specific challenges and vulnerabilities they face. Disaggregated data is used to ensure different groups of women, girls, boys and men and their distinct needs are visible.
Solutions proposed	<input checked="" type="checkbox"/> Overcoming the health and development crisis caused by the COVID-19 pandemic through advancing gender equality and/or the empowerment of women and/or girls (GEEW/G) is the main objective of the intervention.
Who will deliver this solution?	<input checked="" type="checkbox"/> The list of Recipient UN Organizations and partner organizations mainly comprise GEEW/G specific organizations and/or relevant government counterparts with expertise in advancing progress on gender equality. <input checked="" type="checkbox"/> Access to gender expertise within implementation, monitoring, evaluation and oversight mechanisms is indicated/demonstrated.
Theory of change	<input checked="" type="checkbox"/> The Theory of Change articulates the causal link between the interventions proposed and the achievement of outcomes that will advance progress in GEEW/G. <input checked="" type="checkbox"/> The Theory of Change is explicit about the assumptions made to achieve the desired changes in GEEW/G.
Target population	<input checked="" type="checkbox"/> Gender-specific target groups are clearly identified, and/or criteria included for selection (referring back to gender analysis to justify selection criteria). <input checked="" type="checkbox"/> Does not have to target women/girls only (gender equality includes working with men/boys on gender norms) but can be exclusively focused on girls/ women if clearly articulated why this is the best approach to achieve GEEW/G and overcome the health and development crisis caused by COVID-19.
Results framework	<input checked="" type="checkbox"/> All outcomes directly contribute to GEEW/G. <input checked="" type="checkbox"/> Gender-specific indicators included across the Results Framework to track gender specific outcomes/impact. <input checked="" type="checkbox"/> Disaggregated data collected and reported on as standard; all relevant indicators disaggregated by sex, age and other relevant criteria.

Risk analysis	<input checked="" type="checkbox"/> Reference is made to ‘Do No Harm’ principles/approaches ⁹ with analysis of any gender-specific risks and mitigation strategies. For example, will the intervention lead to challenging gender roles that may result in an increase in gender-based violence? Could an increase in women’s participation in decision-making result in a backlash from male decision-makers or traditional male leaders? What steps will the project take to address and mitigate this?
Budget	<input checked="" type="checkbox"/> 80 – 100% of the total budget is allocated to GEEW/G.

GENDER EQUALITY MARKER CODE (2) <i>Advancing gender equality is a significant objective but not the principal reason to undertake this intervention. Gender is reflected in the analysis, theory of change, implementation, results framework and budget allocation. A proposal with gender equality marker code of 2 should demonstrate robust gender mainstreaming throughout.</i>	
Analysis of the socio-economic impact and implications of COVID-19	<input checked="" type="checkbox"/> Includes gender analysis of the socio-economic impact and implications of COVID-19 on different groups of women, girls and/or men and boys in the country, with effort to utilize sex and/or age disaggregated data.
What is the specific need/problem the intervention seeks to address?	<input checked="" type="checkbox"/> The needs/problem analysis highlights the ways in which the COVID-19 crisis is impacting different groups of women, girls, men and boys and the challenges and vulnerabilities they face with reference to intervention area the proposal is focusing on. ¹⁰
Solutions proposed	<input checked="" type="checkbox"/> Gender equality and/or the empowerment of women/girls (GEEW/G) is a significant objective of the intervention.
Who will deliver this solution?	<input checked="" type="checkbox"/> The list of Recipient UN Organizations and partner organizations includes GEEW/G-specific organizations and/or relevant government counterparts with expertise in advancing progress on gender equality.
Theory of change	<input checked="" type="checkbox"/> The Theory of Change articulates how progress in gender equality/women’s empowerment will come about as a result of programming efforts to address the health and development crisis caused by the COVID-19 pandemic. Progress in gender equality and women’s empowerment is an important objective although not the primary one. <input checked="" type="checkbox"/> The logic behind the programme’s design highlights any assumptions made with respect to the programme’s intended contribution to GEEW/G.
Target population	<input checked="" type="checkbox"/> Evidence-base that informed the identification and selection of target groups is highlighted. <input checked="" type="checkbox"/> Distinct needs and capacities of men, women, girls and boys are reflected in the identification of target groups. <input checked="" type="checkbox"/> Number of each target group is quantified, also by gender, age and other relevant criteria (e.g., geographic location, ethnicity, income, disability status etc.).
Results framework	<input checked="" type="checkbox"/> All relevant indicators are disaggregated by sex and age. <input checked="" type="checkbox"/> At least one outcome level gender-specific ¹¹ indicator AND/OR at least one gender-specific output-level indicator per outcome area.
Risk analysis	<input checked="" type="checkbox"/> Importance of applying ‘Do No Harm’ principles/approaches is referenced in the proposal.

⁹ Adopting a “Do No Harm” approach to gender equality requires that projects/programmes conduct an analysis of the potential risks of unintentionally perpetuating or reinforcing gender inequalities in the context of the intervention, proactively monitor risks, and take corrective/compensatory measures if applicable.

¹⁰ It is important to provide country-specify analysis. An additional resource to consult is the COVID-19 Global Gender Response Tracker (www.undp.org/covid-19-gender-dashboard).

¹¹ The term 'gender-specific indicators' is used here to refer to indicators that explicitly call for disaggregation by sex and/or refer to gender equality as an underlying objective.

Budget	<input checked="" type="checkbox"/> At least 30 - 79% of the total budget should be allocated to GEEW/G.
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GENDER EQUALITY MARKER CODE (1) <i>Gender is integrated in the analysis and findings from this analysis ensure the programme does no harm and is not reinforcing gender inequality. Gender equality is not a significant objective of this programme or addressed in the intervention(s). A proposal with gender equality marker code of 1 is not considered a gender mainstreamed programme but does not contribute to gender inequality.</i>	
Analysis of the socio-economic impact and implications of COVID-19 in the country	<input checked="" type="checkbox"/> Mentions women/girls and/or gender but does not provide a substantive analysis of the gender dimensions of the socio-economic impact and implications of COVID-19 within the country. Limited use of disaggregated data to inform analysis.
What is the specific need/problem the intervention seeks to address?	<input checked="" type="checkbox"/> The needs/problem analysis does not identify the ways in which the COVID-19 crisis is impacting different groups of women, girls, men and/or boys. The challenges and vulnerabilities of gender-specific target groups relevant to the intervention are not highlighted.
Solutions proposed	<input checked="" type="checkbox"/> Will contribute in some way to gender equality and the empowerment of women/girls (GEEW/G), but not significantly.
Who will deliver this solution?	<input checked="" type="checkbox"/> The list of RUNOs and partner organizations includes include very few or no GEEW/G specific organizations or relevant government counterparts with gender expertise. <input checked="" type="checkbox"/> No indication that gender expertise is available to or will be used by implementing partners to inform programme design, implementation, monitoring or evaluation.
Theory of change	<input checked="" type="checkbox"/> Unclear as to how programme approaches or methods will contribute to GEEW/G outcomes/ outputs but some evidence of a gender-sensitive approach.
Target population	<input checked="" type="checkbox"/> Gender-neutral language is used in the description of target groups (e.g., families, households, people, children, farmers, migrants, refugees etc.). <input checked="" type="checkbox"/> May mention women/girls but among other groups and no specific criteria is included for their selection.
Results framework	<input checked="" type="checkbox"/> Some indicators are sex disaggregated; no inclusion of gender-sensitive indicators.
Risk analysis	<input checked="" type="checkbox"/> 'Do No Harm' principles/approaches may be implied but are not clearly explained.
Budget	<input checked="" type="checkbox"/> Between 15 - 30% of the total budget should be allocated to GEEW/G.

ANNEX 1: GUIDANCE & TIP SHEETS FOR INTEGRATING GENDER IN PROPOSALS

These tip sheets offer guidance on how applicants can ensure submissions to the COVID-19 MPTF are aligned with gender equality marker codes 2 and 3. The checklists are informed by the [UN Policy Brief: The Impact of COVID-19 on Women](#) and the [IANWGE Minimum Requirements Checklist for Integrating Gender Equality in the Implementation of the UN Framework for the Socio-Economic Response to COVID-19](#).

GENDER ANALYSIS

The application of a gender lens in designing socio-economic responses is especially important, given the role that women are playing as frontline healthcare workers, including healthcare providers and caregivers, as community leaders and in the informal economy.

A UN Framework for the immediate socio-economic response to COVID-19

In proposals to the COVID-19 MPTF, key elements to integrate are:

- ⇒ Gender analysis
- ⇒ Sex and age disaggregated data
- ⇒ Distinguishing between different population groups by gender and other relevant criteria such as age, geographic location, race, ethnicity, income, disability status, migratory status.

Gender analysis is essential to understanding what specific needs and capacities women, girls, boys, and men affected by COVID-19 have and what specific challenges and vulnerabilities they face. This understanding is a precondition for developing socio-economic responses that are based on local needs and priorities, leave no-one behind, and uphold 'Do No Harm' principles. In proposals, this approach can be supported by:

- **Making use of existing evidence**, including official government data and evidence

generated by women's organizations/networks and civil society.

- **Incorporating disaggregated data** to help make different groups of women, girls, boys and men and their distinct needs more visible.
- **Ensuring proposed interventions are based on evidence** rather than assumptions about a situation, society or gender roles.
- **Analyzing capacities, not only needs**, of different groups of women, girls, boys and men to cope with, respond to and recover from the impacts of COVID-19. Capacities of vulnerable groups such as female-headed households are often underestimated.

GUIDING QUESTIONS FOR A GENDER ANALYSIS:

- What roles do women, girls, boys, men and older people traditionally play and who controls resources in the household and the society?
- Do any gender or age groups in the society face discrimination, including in their ability to access information, services and resources at this time?
- What capacities do different population groups of men, women, girls and boys have for coping with, responding to, and recovering from the impacts of the COVID-19 epidemic?
- What specific needs do women, girls, boys and men of different ages and in different parts of the country have for support and assistance?
- Are there any vulnerable groups/groups with particular needs that should be targeted for certain types of interventions? If the action intends to target only one or a few specific gender and age groups, what other groups might need to be involved as well and what would be the consequences of not involving them (e.g. tensions, stigmatization, failure of objectives, etc.)?

THEORY OF CHANGE

A theory of change approach highlights pathways to change by mapping the underlying assumptions and the implementation steps required to reach desired outcomes. **If the intention of the programme is to make a significant contribution to gender equality and/or the empowerment of women/girls (GEEW/G) or the programme has this as its primary objective, then the theory of change should reflect this.**

This means clearly articulating how progress toward GEEW/G will come about as a result of programming efforts and **being explicit about the assumptions made** to achieve the desired changes in GEEW/G.

KEY ELEMENTS OF THE THEORY OF CHANGE

APPROACH

- **Context** for the initiative, including social, political and environmental conditions, the current state of the problem the programme is seeking to influence, and other actors able to influence change.
- **Long-term change** that the initiative seeks to support and for whose ultimate benefit.
- **Process/sequence of change** anticipated to lead to the desired long-term outcome.
- **Assumptions** about how these changes might happen, as a check on whether the activities and outputs are appropriate for influencing change in the desired direction in this context.

Articulating assumptions is the main part of developing a theory of change. Social change processes always involve and affect men and women, girls and boys - often in different ways. In the uncharted territory of COVID-19, re-examining any gender assumptions and logic, and

identifying potential risks and stumbling blocks to GEEW/G, becomes even more important.

This requires **paying explicit attention to (possible) reversals in gains made**, as backlash to change is a critical concern for gender equality work. The theory of change should also **show sensitivity to context and to power dynamics**, being alert to **alternative or unexpected outcomes that could impact progress towards GEEW/G**.



TIPS ON INTEGRATING GENDER INTO THE THEORY OF CHANGE

- Highlight gender dimensions of the social and economic impact of COVID-19 referring to gender analysis and relevant disaggregated data, including by sex and age.
- Be explicit about what aspects of these gender dimensions the intervention is seeking to influence/change as part of efforts to respond to COVID-19 and which specific groups of women/ girls and/or men/boys will ultimately benefit.
- Include a brief analysis of the actors/ organizations/networks that are key to influencing change that will contribute to GEEW/G (e.g., specific government Ministries, women's rights organizations, men's networks, community leaders, village elders).
- Interrogate and analyze assumptions and risks using a gender lens: could the intervention risk reproducing gender patterns and gender bias in processes and results? Does the Theory of Change make assumptions about gender roles, behavior and identities that could impact progress towards GEEW/G?

RISK ANALYSIS

Across every sphere, from health to the economy, security to social protection, the impacts of COVID-19 are exacerbated for women and girls by virtue of their gender. However well-intentioned, interventions to address the socio-economic impacts of COVID-19 may fail to reduce or prevent these impacts. In some cases, the intervention itself could have unintended negative effects on groups of women, girls, men or boys.

Applicant UN Organizations should therefore carefully analyze gender-specific risks or potential negative effects and develop prevention and mitigation measures.

As part of our promise to “do no harm” and be conflict-sensitive, this will include an analysis of the human rights and gender impacts to inform the design of policies that address these risks, protect development gains and reduce the risk of social violence in the coming months and beyond.

UN Framework for the immediate socio-economic response to COVID-19

Interventions should be based on an analysis of what negative impacts the COVID-19 epidemic holds for women, girls, boys and men. These impacts should be mitigated to the greatest extent possible.

Proposals should also identify what negative effects the intervention *could* cause for different gender and age groups and include effective measures to prevent these. For example, the risk of stigmatization, violence or tensions between groups or within households.

GUIDING QUESTIONS FOR INTEGRATING GENDER INTO DO NO HARM APPROACHES

- ⇒ What are the negative effects for specific groups of women, girls, men and boys arising from the socio-economic impact of COVID-19?
- ⇒ Does the intervention prevent or mitigate any of these negative effects?
- ⇒ Could the intervention put any groups of women or girls, men or boys at risk?
- ⇒ What measures are in place to prevent or mitigate any unintended negative effects of the intervention?

In the 2nd interim Call for Proposals there are several opportunities to include relevant information in submissions. The most relevant places to highlight a ‘Do No Harm’ approach and include an analysis of gender-specific risks and mitigation strategies would be in response to the following question prompts included in the proposal template:

- *What is the specific need/problem the intervention seeks to address?*
- *Solutions proposed and how does this collaborative programme solve the challenge.*
- *If and how the theory of change reflects the gender equality marker score selected.*

TARGET POPULATIONS

Proposals to the COVID-19 MPTF need to identify and describe the direct users of the solution and potential impact on beneficiaries. In the 2nd interim Call for Proposals, applicant UN organizations are requested to highlight how the solution(s) is data driven - especially on the populations being targeted - highlighting once again the importance of gender analysis.

Gender analysis presented elsewhere (for example, when applicants are requested to ‘apply a gender lens to the analysis and description of the problem’) should have already identified the distinct needs, concerns and capacities of women, girls, boys and men in the context of the country’s COVID-19 response. These should be reflected in the identification of target populations, justifying why the intervention is focusing on these specific groups of women and/or girls, men and/or boys.

Drawing on thorough gender analysis is particularly important for proposals that aim to make a significant contribution to GEEW/G as it will help to ensure the intervention responds to actual needs, rather than to organizational mandates.

Interventions that have GEEW/G as a primary objective should ensure gender-specific target groups are clearly identified, and/or criteria for selection is included.



TIPS FOR TARGETING AND GENDER MAINSTREAMING

- Refer back to gender analysis and disaggregated data presented in previous sections to justify selection criteria.
- Highlight the evidence-base that informed the identification and selection of the target group(s).
 - ✓ Who established the need (plans, national authorities, civil society, UN analysis, citizens)?
 - ✓ What evidence did they draw on? For example, socio-economic impact assessment, national preparedness plan, sectoral analysis, rapid household income survey, sentiment analysis/ social listening.
- Avoid gender neutral terms such as “families”, “households”, “people”, “children”, “farmers”, “market vendors”, “migrants”, “refugees”, “prisoners”. Instead, recognize the different genders and ages within these population groups. For example, by using terms such as “female-headed households”, “male-headed households”, “boys and/or girls”, or “adolescent girls”, “adolescent boys” rather than just “children”.
- Be as specific as possible in identifying target groups, not just by gender but also other criteria such as age, geographic location, race, ethnicity, income, disability status, migratory status.
- If possible, quantify the number of each target group, also by gender and age.

IMPLEMENTING PARTNERS

Proposals to the COVID-19 MPTF can leverage the UN's connections with civil society to support a human-rights based response to the epidemic. Finding ways to actively involve different gender and age groups – in a way that does not overly delay crisis response efforts – helps to make the proposed intervention(s) more sensitive to gender, age and other diversity issues.

Proposals to the COVID-19 MPTF that **seek to make a significant contribution to GEEW/G should reflect this commitment in the selection of implementing partners**, including governmental and non-governmental institutions. For example, this may include partnering with government Ministries that have ongoing gender equality initiatives, national women's machineries, and/or civil society organizations that promote gender equality and protect the

mainstreamed into monitoring, evaluation and oversight mechanisms.

For proposals making a significant contribution to GEEW/G or having GEEW/G as a primary objective, **this means including women and women's organizations at the heart of the COVID-19 response**. Efforts should be made to engage with women, girls, boys or men among vulnerable/marginalised groups, including through relevant representatives (e.g., community leaders, national human rights institutions, civil society organizations, women's networks, women and child rights organizations).

Beyond its own expertise and resources, the UN can use its significant reach to help mobilize the vast network of partnerships required for a whole of society, whole of world response. The UN has extensive connections with civil society organizations, women's groups and volunteer groups... Many often play an indispensable leadership role in the response, notably in reaching out to vulnerable people, and in getting to remote places. They can amplify responses.

UN Framework for the immediate socio-economic response to COVID-19

rights of women and girls.

In describing how it will deliver the proposed intervention(s), **applicant UN Organizations should identify access to internal and/or external gender expertise**, summarizing how this expertise will be applied to ensure gender is

RESULTS FRAMEWORK

Without sex and age disaggregated data, inequalities – including gender inequalities – will be overlooked, making it impossible to implement an appropriate and efficient gender, rights-based, response to COVID-19. Conversely, decisions that are informed by accurate data and include a gender perspective are more likely to be effective.

The UN is committed to support gender analysis and sex-disaggregated data to inform COVID-19 response programs and policies. The COVID-19 MPTF reflects this commitment, requesting Recipient UN Organizations include appropriate disaggregation of data and indicators to understand the impacts of COVID-19 as part of their Results Framework.

Special efforts should be made to disaggregate relevant indicators by sex, age, disability, national origin, nationality, migratory status, race/ ethnicity, income, geographic location and other characteristics relevant in national contexts.

UN Framework for the immediate socio-economic response to COVID-19

The inclusion of explicit gender equality outcomes, outputs and indicators in the Results Framework also strengthens accountability on the progress made on gender equality issues.

Without sufficient data, a meaningful analysis of the impact on gender equality is difficult. A significant level of data disaggregation is also required to ensure no-one is left behind.

For proposals that aim to **make a significant contribution to GEEW/G or have GEEW/G as the primary objectives**, gender aspects need to be integrated into monitoring and

evaluation systems. Selecting gender equality outcomes and outputs that are realistic within the time frame of the programme is a further consideration. Taking a long-term perspective (i.e., social change takes time) may not be feasible given the duration of the programme. However, it may be possible to identify immediate and intermediate results and indicators that are stepping-stones to transforming gender relations and achieving gender equality outcomes.

Gender equality results are results achieved for women/girls compared with men/boys, including participation in programme activities, access to programme and other resources, practical benefits, and strategic changes in gender relations. Gender equality results may be immediate or process results, intermediate results or outputs, or long-term results or outcomes.

Good practice examples from the first Call for Proposals to the COVID-19 MPTF can be found in the annexes. These are excerpts from Results Frameworks developed by Recipient UN Organizations based on the template provided. These excerpts reflect a commitment to collecting sex and age disaggregated data and/or the inclusion of indicators that help capture intermediate gender equality results. The excerpts should be viewed as illustrative rather prescriptive.

ANNEX 2: GOOD PRACTICE EXAMPLES FROM THE FIRST CALL FOR PROPOSALS

As part of the gender equality marker review process during the first Call for Proposals good practice examples across key elements of proposals were identified, a selection of which are highlighted in the following pages. These excerpts are taken from proposals submitted under Fund Windows 1 and 2, and represent different geographic regions, intervention areas, and countries (Côte d'Ivoire, Ghana, Guinea-Bissau, Indonesia, Kosovo, Kyrgyzstan, Malawi, Nepal, São Tomé and Príncipe, Timor-Leste, and Tunisia).

2.1 GENDER ANALYSIS GOOD PRACTICE EXAMPLE: ANALYZING THE IMPACT OF COVID-19 ON DIFFERENT GENDERS, AGES & COMMUNITIES IN CÔTE D'IVOIRE

The proposal from Recipient UN Organizations in Côte d'Ivoire provides an example of robust gender analysis and use of disaggregated data to illustrate the socio-economic impact and implications of COVID-19. It discusses the roles of different gender and age groups and their control over resources; it analyzes discrimination and assesses the effects of the pandemic on different population groups and describes the capacities of these groups to cope and respond to the crisis.

“Development and humanitarian programs that support women and children are disrupted during public health emergencies, although their needs may in fact be amplified. Even before the COVID-19 virus hit, violence against children and in families was high and social norms around gender and child disciplining condone violence. The Violence Against Children Survey 2018, showed that majority of (57%) girls and boys (66%) in Côte d’Ivoire have experienced physical, sexual and emotional violence... Without school as a place where children can be provided with a routine but also monitored outside their home, the risks to children tend to increase. Children who are not registered at birth due to disruptions, such as the current COVID-19 pandemic, are particularly vulnerable – unregistered, “invisible” children may be at heightened risk of violence, trafficking etc....

In Côte d'Ivoire, most of women are engaged in precarious jobs and any disruption could suppress women's ability to earn a living and support their families, widening the gender gap in livelihoods. Women have been shown to be the main household resources providers. An increased food insecurity in the aftermath of crises may put them at heightened risk of, inter alia, domestic violence and other forms of violence due to increased tensions in the household. As a result, this crisis would further expose this population profile to negative coping mechanisms as they seek to provide for themselves and their dependents. Similarly, overburdened health services would risk diverting resources away from the services that women need. This would exacerbate the lack of access to sexual and reproductive health services.... Women [also] represent 70% of the global health and social sector workforce. Special attention should be given to their health and psychosocial needs as frontline health workers, as well as to how their work environment may expose them to illness and discrimination.

In addition, in Côte d'Ivoire before the COVID 19, nearly 811 households’ of 2059 persons are refugees and 345 asylum-seekers persons are under international protection...Women and girls represent 36% of this population...They live in precarious and often overcrowded neighbourhoods, which further exposes them to contamination and the rapid spread of the disease...Beyond this, the health crisis is profoundly affecting refugee and asylum-seeking families as most of them invest in informal economic activities. The closure of markets and services...mainly affects the refugees' meagre physical and economic capital. Indeed, this loss of productive capacity and source of income will have medium- and long-term consequences that will affect their resilience and early recovery capacities after the health crisis”.

2.2 THEORY OF CHANGE GOOD PRACTICE EXAMPLE: SOCIAL PROTECTION & WOMEN'S EMPOWERMENT IN INDONESIA

The proposal from Recipient UN Organizations in Indonesia offers an example of a theory of change (TOC) that ascribes a clear causal link between the proposed intervention and advancing progress on GEEW/G. This partial extract shows gender mainstreaming across key elements of the TOC approach: there is a description of assumptions upon which the TOC is based; it recognizes the possibility of inadvertent negative effects and importance of Do No Harm principles; and it shows sensitivity to context and power dynamics that may be challenged by the purposeful targeting of women.

The proposed joint programme will contribute to the outcome: Indonesia's most vulnerable population, particularly women and children of marginalised groups are protected and safeguarded from the adverse socio-economic impact of the COVID-19 crisis.

It is based on the theory of change that:

If:

1. The government and key partners have enhanced policy and capacity to scale up and expand social protection coverage and fiscal space to include the affected and marginalised population, particularly women and children of marginalised groups;
2. COVID-19 taskforces, national and sub-national, have increased capacity to plan, communicate, build partnerships and deliver the social protection response to COVID-19 crisis in an inclusive and coordinated manner; and
3. Key institutions and partners have increased capacity to adopt data analysis, financial and digital innovations for effective and efficient delivery of a social protection response that is gender-sensitive and inclusive.

Then, the adverse socio-economic impact of the COVID-19 crisis on vulnerable populations, particularly women and children of marginalized groups will be mitigated, **because** the necessary capacities and conditions for an inclusive, responsive and comprehensive social protection responses are in place.

The TOC will be implemented leveraging the complementarities of the mandates and technical expertise among UN agencies – UN WOMEN, UNDP, WFP and UNICEF – while drawing on the full knowledge on sustainable and resilient development of the entire United Nations System through the UN Resident Coordinator's Office in Indonesia.

While focusing urgent action for people in need and immediate mitigation of adverse effects of COVID-19 on the most vulnerable and farthest left behind, the proposed interventions focus on building back better with the women empowerment approach as a cross-cutting priority.... Gender has been integrated into the proposed solutions, theory of change and result framework, and target *populations*. *Overall the programme will strive to minimize the harm it may inadvertently cause through providing social protection in line with global Do No Harm principles.... The programme will develop transparent and accessible feedback mechanisms to capture beneficiary complaints or grievances related to targeting, service delivery or other programme functions and provide redress swiftly....*

2.3 RISK ANALYSIS GOOD PRACTICE EXAMPLE: GENDER-SENSITIVE SOCIAL PROTECTION IN GUINEA-BISSAU

In the first call for proposals, Recipient UN Organizations in Guinea-Bissau were among a handful that explicitly referenced the importance of applying ‘do no harm’ principles. The gender-mainstreamed proposal focused on enhancing social protection mechanisms, highlighting the need to be mindful of unintended consequences (e.g., the potential for cash transfers to influence gender power relations in a household with either positive or negatives effects). The proposal also gave some indication of how implementing partners might mitigate known risks associated with targeted social protection programmes. For example, by utilising internal gender expertise to ensure adherence to best practices related to ‘do no harm’.

The project will be managed in a gender- and conflict-sensitive manner applying proven and practical tools. It will ensure all actors engaged respect do-no-harm principles and activities are designed with appropriate risk mitigation measures. It will take an extra care to reduce known risks associated with interventions supporting women’s empowerment and ensure the safety of all participants... A trained gender focal point ensures consistency with corporate strategies and best practices. At regional and headquarters level, senior specialists provide technical support and oversight to all functional areas, as well as cross-cutting support in accountability, evidence generation, gender, and innovation.

The below illustrates how gender-specific risks/potential negative effects and associated mitigation strategies could have been further elaborated:

The project will be managed in a gender- and conflict-sensitive manner applying proven and practical tools. It will ensure all actors engaged respect do-no-harm principles and activities are designed with appropriate risk mitigation measures. It will take an extra care to reduce known risks associated with interventions supporting women’s empowerment and ensure the safety of all participants. *These risks may include:*

1. *Cash targeted to adult female household members could increase their bargaining power and strengthen their position in the household by giving them more choices, including the self-sufficiency to manage or influence expenditure. Alternatively, the shifting power dynamics could lead to backlash by a male partner who is trying to reassert control, thus increasing the risk of violence.*
2. *Conditions or work requirements attached to social protection programmes may interfere with childcare and domestic responsibilities, adding an extra burden to women’s lives whilst reinforcing gender stereotypes around women’s sole responsibility for caretaking. It may also increase girls’ work burdens, who tend to substitute the work of their mothers, thereby reproducing discriminatory norms and practices.*
- 3.

Proposed mitigation measures include drawing on context specific evidence on gender norms to support decisions about design choices, communication plans and risk mitigation strategies (such as encouraging men and boys within beneficiary households to support women’s empowerment, building their support for a more equal division of labour and care work). M&E systems are also being designed to reflect the gendered risks and opportunities involved supported by... a trained gender focal point [to] ensure consistency with corporate strategies and best practices...

2.4 TARGET POPULATIONS GOOD PRACTICE EXAMPLE: ASSISTING NON-MAJORITY COMMUNITIES & DOMESTIC VIOLENCE SURVIVORS IN KOSOVO

The proposal from Recipient UN Organizations in Kosovo ensured gender considerations were taken into account when identifying the programme's target populations: the criteria for selection is evidence-based (e.g., Common Kosovo Analysis 2020) and focused on those most at risk of being left behind, intended beneficiaries are disaggregated (by gender and ethnicity), and efforts are made to quantify the number of each beneficiary group.

The intervention will aim to mitigate social and economic impact of COVID 19 pandemic and support livelihood of the most disadvantaged and marginalized non-majority groups in Kosovo. It will seek to provide emergency as well as broader socio-economic support to non-majority communities, in particular Roma, Ashkali and Egyptian and to a lesser extent other minority in need. It will also provide targeted solutions to women gender-based violence (GBV) / domestic violence (DV) survivors from both majority and minority communities. The project will benefit women GBV/DV survivors from majority and non-majority communities as well as vulnerable non-majority population (both women and men, boys and girls) throughout Kosovo.

According to the Common Kosovo Analysis 2020 Roma, Ashkali and Egyptian communities were the furthest left behind already before the pandemic. They have faced disproportionately higher rates of mortality and malnutrition, lower access to education and employment and have been more subject to violence. This has been determined by lower rates of health seeking behavior, poorer parenting practices, higher prevalence of early marriage and child labour linked to poverty and discriminatory practices. The situation has been further exacerbated by the pandemic and related lockdown. According to UNHCR, the total number of displaced members of non-majority communities who have found durable solutions in Kosovo since 2000 until Today is 28,416. This includes 13,947 women and 14,469 men (12,125 Serbs, 7,647 Egyptians and Ashkali, 3,970 Roma, 1,877 Bosniaks, 1,464 Gorani, 1,289 Albanians, 21 Montenegrins, 19 Turks and 4 Croats). There remain estimated 16,100 displaced persons within Kosovo (7,432 women and 8,668 men).

In total, this joint programme will reach a total of 57,260 direct beneficiaries and 126,010 indirect beneficiaries. Around 50,000 will receive accurate and reliable information on their rights and will be enabled to make use of state social care services and benefits. Up to 4180 Roma, Ashkali and Egyptian as well as Serb community members will be directly assisted: 600 will be provided with access to essential healthcare services, including psychosocial services, 530 with food and hygienic items, among others. 240 will obtain support in undertaking economic related activities such as income generating ones, trainings and vocational guidance, which will enable them to provide at least partially for themselves and their families and thus improve their overall situation. Additionally, the project will support eight existing safe houses for women victims of violence. The three-leveled focus will target women sheltered within those safehouses, relevant social workers as well as providing support directly to the safehouses themselves. The programme will focus on 14 municipalities throughout Kosovo, representing a geographically and ethnically diversified community, reaching to all groups, majority and minority.

Around 500 women survivors of domestic violence, including women from non-majority communities, will be offered protection in eight shelters in Kosovo and will be directly targeted by the intervention, while the population at large will benefit indirectly from education material and awareness raising on prevention and treatment of gender-based violence and domestic violence cases.

2.5 IMPLEMENTING PARTNERS GOOD PRACTICE EXAMPLE: CASH TRANSFER SCHEME FOR LOW-INCOME HOUSEHOLDS IN TIMOR-LESTE

The proposal from Recipient UN Organizations in Timor-Leste ensured that the selection of implementing partners reflected the programme's intention to make a significant contribution to gender equality and/or the empowerment of women/girls. The importance of engaging with government institutions responsible for coordination and monitoring of gender equality was highlighted, alongside the essential role of civil society in monitoring the gendered impacts of COVID-19. Efforts will be made to engage with women, girls, boys and/or men among vulnerable/marginalised groups, including through relevant representatives (e.g., women's networks, LGBTIQ and disability groups). The applicant agencies also highlighted the availability of internal and external expertise to ensure gender is mainstreamed into the programme's monitoring, evaluation and oversight mechanisms (e.g., through existing gender equality coordination mechanisms).

UN Women will provide technical assistance, providing a gender lens in the development of the scheme's implementation and monitoring. This will leverage UN Women's strategic partnerships, which include the State Secretary for Equality and Inclusion (SEII) as the government institution responsible for coordination and monitoring of government gender equality efforts, diverse civil society organizations and networks at national and sub-national levels including women's, LGBTIQ and disability groups, as well as partnership with the private sector through the Women's Empowerment Principles.

UN Women also plays an important coordination and convening role, which can leverage the multi-stakeholder Gender and Protection Working Group, which UN Women chairs in collaboration with UNICEF, as well as other gender equality coordination mechanisms. This will create opportunities for the UN to ensure the design and roll-out benefits from diverse consultations and inputs from gender equality and inclusion specialists, which can encourage more participatory practices as an approach for future social protection schemes.

These CSOs will further support the implementation and monitoring of the scheme, providing practical inputs and coordination at a local level to monitor timely and sensitive delivery. The CSOs will also provide a secondary channel for feedback from the community. UN Women will support the civil society partners to monitor the gendered impacts of COVID-19 on women's economic empowerment, which will contribute to the UNDP assessment and provide updated snapshots of the effectiveness of response efforts, with consideration to Timor-Leste's pre-existing normative commitments (Maubisse Declaration, CEDAW, SDGs, etc).

2.6 RESULTS FRAMEWORK GOOD PRACTICE EXAMPLES FROM FIRST CALL FOR PROPOSALS IN DIFFERENT PROGRAMME AREAS

Fund Window 1: National planning and governance and ensuring gender-responsive macro-economic policy solutions to COVID-19 Excerpt from Results Framework developed by Recipient UN Organizations in Tunisia

Window 1: Proposal Outcome	Outcome: Government agencies are equipped with tools to target more effectively vulnerable and marginalized populations with their COVID-19 responses.			
		Baseline (March 2020)	Target	Means of verification
Outcome Indicator	1a: Proportion of vulnerable and marginalized groups in Ministry of Social Affairs Social Assistance Registers receiving assistance	20%	At least 50%	Report extracted from the Ministry of Social Affairs Social Database
	1b: Number of targeted national responses (government and legal documents, plans, etc.) to COVID-19 that are aligned to the IASC policy for gender equality and the empowerment of women and girls in humanitarian action	0	Five national response documents (government and legal documents, plans, etc.) to COVID-19 are aligned to the IASC policy for gender equality and the empowerment of women and girls in humanitarian action	Policy Documents, National and Sector Response Plans, National Budget
	Output 1.2. Gender-responsive macro-economic policy solutions integrated into the legal normative frameworks and government socio-economic, financial and fiscal measures			
Output 1.2 Indicators	1.2a: Number of UN Women gender analysis reports produced on legal framework and socio-economic measures	0	5 Gender analysis reports produced	Sectoral Strategies
	1.2b: Number of resource pieces (fact sheets and guidelines) provided to ministries to support mainstreaming of gender issues in legal frameworks and budgetary allocations	0	5 resource pieces provided	Resource pieces
	1.2.c: Number of women civil society organizations actively participating/engaging	0	10 CSOs	Meeting reports

	Output 1.3: Support the collection and analysis of gender and sex-disaggregated data in order to accurately identify the differential impact of the outbreak on the population and increase the population's awareness			
Output 1.3. Indicators	1.3.a Number of trainings for National Institute of Statistics (NIS) on collecting and analyzing gender and sex-disaggregated data including the new methodology on SDG 5c	0	4 trainings conducted	Training workshop report
	1.3.b Percentage of trained NIS staff demonstrating increased knowledge on collecting and analyzing gender and sex-disaggregated data including the new methodology on SDG 5c	0	20% of staff trained	Methodology, Pre- and Post-Training survey
	1.3.c Research methodology for report on the socio-economic situation of women including economic violence developed	No	Yes	Meeting report, Research Methodology
	1.3.d Qualitative research on the socio-economic situation of women including economic violence completed	0	1 Report completed	Report on the socio-economic situation of women including economic violence
	1.3.e Number of advocacy and media campaigns produced on the differential impact of COVID-19 on the population	0	10 communication pieces produced	Official declarations Media coverage

Fund Window 1: Ensuring collection and reporting of sex disaggregated data as part of the emergency health response
Excerpt from Results Framework developed by Recipient UN Organizations in Kyrgyzstan

Window 1: Proposal Outcome	Outcome: By December 2020 the healthcare system is able to prevent infection of COVID-19 among healthcare workers and in health facilities.			
		Baseline	Target	Means of verification
Outcome indicator	1.1 Achieve universal health coverage, including financial risk protection, access to quality & equitable essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all (SDG Target).	60%	80%	National facility level data
Proposal Outputs	1.1.1 Health facilities are equipped with essential PPE supplies and Healthcare providers trained on infection control and proper use of PPE 1.2.1 All health facilities servicing communities under lockdown have access to infection control mechanisms through the provision of non-contact thermometers, disinfection supplies and measures, including personal hygiene and sanitation kits. 1.3.1 Hospitals and PHC have essential life-saving medicines for patients with chronic medical conditions 1.4.1 Logistic and procurement support to maintain essential service provided			
Proposal Output Indicators	1.1.1a Number of health facilities equipped with PPE such as gloves, gown, coverall protection surgical respirator and mask, goggle, face shield.	20 health facilities	40 health facilities	PPE and consumables procured, delivered and used
	1.1.1b Number of female and male health workers equipped with PPE	200 female & 200 male health workers	1000 female and 750 male health workers	Distribution records
	1.1.1c Number of healthcare workers trained on PPE	200 female & 2000 male health workers trained	In total 2500 health workers including 1750 female health workers	Training Records
	1.2.1 Number of health facilities servicing communities under lockdown that have access to infection control mechanisms and supplies	8 hospitals & 12 PHC facilities	22 hospitals & 4,000 PHC facilities	Supply and Procurement Reports; Hospital reports PHC reports; e-health records
	1.3.1 Number of hospitals and PHC that have essential life-saving medicines for patients with chronic medical conditions	Stock-out	22 hospitals have essentials drugs	Hospital and PHC records' e-health records
	1.4.1 Number of supplies distributed	Monthly distribution	Twice per month distribution	Distribution record

Fund Window 1: Ensuring continuity in maternal and newborn health services during COVID-19 epidemic

Excerpt from Results Framework developed by Recipient UN Organizations in Malawi

Window 1: Proposal Outcome	Outcome: Pregnant women have continuity in utilization of Maternal and Newborn health services throughout the COVID-19 pandemic.			
		Baseline	Target	Means of verification
Outcome Indicator	1. Number of women who have utilized MNH services during COVID-19.	0	300,000	Ministry of Health
	2. Number of safe births attended by skilled health personnel during COVID-19.	0	140,000	Ministry of Health
	3. Percentage of pregnant women including adolescents attending ANC in the target facilities that attend all their scheduled ANC visits during the COVID-19 period.			Ministry of Health
	4. Percentage of all designated BEMONC facilities that performed all 7 signal functions during the COVID-19 period.			Ministry of Health
	Output 1.1.1: Protocols and guidelines established to review guidelines and ensure compliance of facilities for the treatment of pregnant women during COVID-19			
Output 1.1.1 Indicators	Number of copies of guidelines and protocols distributed to health centers nationwide.	0	20,000	Ministry of Health
	Number of health facilities that have mechanisms in place for treatment of pregnant women during COVID-19 in line with protocols and guidelines that are aligned to WHO standards.	0	46	Ministry of Health
	Output 1.2.1 Strengthened continuity of maternal and new-born health services including provision of comprehensive obstetric care services operations during COVID-19.			
Output 1.2.1 Indicators	Number of COVID-19 treatment centers, hospitals and health centers that have COVID-19 safe antenatal and birth facilities.	0	46	Ministry of Health
	Number of safe births attended by UNFPA supported personnel during COVID-19.	0	290	Ministry of Health
	Output 1.3.1 Increased access to information, support and referral systems			
Output 1.3.1 Indicators	Number of women of childbearing age including pregnant women and adolescents accessing advice and counselling from a hotline service.	0	4,000,000	Ministry of Health
	Number of women accessing referrals to COVID-19 treatment centers.	0	4,000,000	Ministry of Health
	Number of men and boys involved in referral and information sharing on COVID-19	0	350,000	Ministry of Health

Fund Window 2: Mitigating the impact of COVID-19 on women’s livelihoods and economic security
Excerpt from Results Framework developed by Recipient UN Organizations in Nepal

Window 2:				
Proposal outcome	Outcome: Socio-economic impact mitigated and livelihoods safeguarded for those made most vulnerable by COVID-19 measures			
		Baseline	Target	Means of verification
Outcome Indicator	2.1a Number of households of which at least 33% are female headed households whose financial capital is not depleted by more than 30% (disaggregated by number of female / male headed households)	0	At least 80%	Project reports
	2.2a Number of persons, of which at least 33% women, who are employed and have earned at least the national minimum wage for 3 work months by sex, age and ethnic group	TBD	530	Project reports
			500 Nrs. 13450	Project reports
	2.3 Employment rate after 2 months of completing CTEVT training, disaggregated by gender, vulnerability and ethnicity		At least 50%	Project reports
Proposal Outputs	2.1.1 Informal workers and returnee migrants including women have more sustainable income sources			
	2.2.1 Informal workers including women have new skills			
Proposal Output Indicators	.1a			
	1. Number of enterprises/ businesses created at local level (disaggregated by type of MSME ownership-male/female), of which at least 33% are run by women	0	1,000	
	2. Number of people (by age, sex, ethnicity) who participated in activities implemented to boost employment and income, with at least 33% women	0	1,400	Project reports
	2.2.1a Number of persons, including at least 33% women, who completed a CTEVT certificate (disaggregated by sex and other vulnerability factors)		At least 200	Project report

Fund Window 2: Applying a gender lens to social protection measures

Excerpt from Results Framework developed by Recipient UN Organizations in Indonesia

Window 2: Proposal outcome	Outcome: By December 2020, Indonesia's most vulnerable population, particularly women and children of marginalised groups are protected and safeguarded from the adverse socio-economic impact of the COVID-19 crisis			
		Baseline	Target	Means of verification
Outcome Indicator	A) SDG 1.3.1 Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, newborns, work- injury victims and the poor and the vulnerable	38%	57%	MoSA institutional records
	B) SDG 1.5.4 - Proportion of local governments that adopt and implement local disaster risk reduction strategies in line with national disaster risk reduction strategies	173/514 local governments, have a DRR plan of which 90 are partly integrated with Sendai Framework	190/514 have a DRR plan at least partly integrated with Sendai Framework	BNPB reports
	C) SDG 2.1.1 Prevalence of undernourishment	6.7% (2019)	6.4%	National Socioeconomic Survey
Proposal Outputs	1. The government and key partners have enhanced policy and capacity to scale up and expand social protection coverage and fiscal space to include the affected and marginalised population, particularly women and children of marginalised groups;			
	2. COVID-19 taskforces, national and sub-national, have increased capacity to plan, communicate, build partnerships and deliver the social protection response to COVID-19 crisis in an inclusive and coordinated manner			
	3. Key institutions and partners have increased capacity to adopt data analysis, financial and digital innovations for effective and efficient delivery of a social protection response that is gender-sensitive and inclusive			
Proposal Output Indicators	Output Indicator 1.1 Number of social welfare workers/village cadre with increased capacity for social protection response	0	750	MoSA training reports MOV training reports
	Output Indicator 1.2 Number of integrated rights-based, equity and gender-responsive policy solutions (including food security and nutrition) creating an enabling environment for pandemic response that have been implemented	0	1	Modifications to existing national policies or social protection schemes with

				reference to activities in the COVID-19 MPTF
	Output Indicator 2.1 Number of coordinating mechanisms established under the COVID-19 taskforces (TF) with increased capacities	0	5	Public communications by TF Taskforce meeting reports Existence of SOPs
	Output Indicator 2.2 Number of inter-agency SOPs for coordination of social protection services	0	1 (National) 5 (Sub- national)	Programme reports
	Output Indicator 3.1 Number of data analysis, financial and digital innovation (e.g. online applications and platform) that support social protection response to COVID19 crisis that is inclusive and gender sensitive	0	5	Programme reports
	Output 3.2 indicator Number of women in informal and vulnerable employment, female headed households and single mothers supported through financial and digital innovations	0	10,000,000 (indicative)	MoSA institutional records

Fund Window 2: Gender-responsive food and nutrition assistance

Excerpt from Results Framework developed by Recipient UN Organizations in São Tomé and Príncipe

Window 2: Proposal outcome	Outcome: Mitigate the socio-economic impact and safeguard people and their livelihoods			
	2.1 Ensure equitable access of the most vulnerable rural families to food security and nutrition during the COVID-19 epidemic			
		Baseline	Target	Means of verification
Outcome Indicator	2.1a Number of vulnerable households touched by the project who register a stability in their food security and nutrition situation (disaggregated by sex as well as sex of the household)	0	540 households (<i>male headed households; female headed households</i>) 2 700 people (including men, women, children/youth and elders)	Project report
	2.2a Number of gender analysis undertaken pre and post interventions - at district level - at community level - at household level	0	1 gender analysis for each level (district level, community level and household level)	Project reports
Output 1. Capacity of trainers and beneficiaries built on agricultural techniques and better conditions of work to improve their resilience	1.1a Pre intervention gender analysis and development of training modules including key gender issues thought dialogue at household level	0	1 Gender analysis	Project report Training modules sensible to gender issues
	1.2a Training beneficiaries on innovative production techniques adapted to the edaphoclimatic conditions of production sites, food utilization and nutrition (disaggregated by sex as well as sex of the household)	0	20 trainers 2.700 people 540 households (<i>male headed households; female headed households</i>)	Training reports Project report
	1.3a Training beneficiaries on safety, health and hygiene at workplace particularly small producers, workers/employers, other relevant labor market institutions and actors (disaggregated by sex as well as sex of the household)	0	2.700 people 540 households 2.700 people 540 households (<i>male headed households; female headed households</i>)	Training reports Project report

	1.4a Gender-sensitive awareness sessions aimed at rural women on topics related to women's empowerment, security measures to be taken in the current scenario of COVID-19, the importance of self-help groups and participation in decision making processes, harmful gender and social norms regarding foods, the allocation of resources within the household, specific nutrition needs of girls and boys, etc	0	540 households <i>(male headed households; female headed households)</i> ~1400 women	Training reports Project report
	1.5a Distribution of production kits to families, farmers, and canteen / school garden farmers, (disaggregated by sex of the household)	0	540 households <i>(male headed households; female headed households)</i>	Project report
	1.5a Acquisition of seeds and plants	0	X seeds (corn, beans, tomato, eggplant, okra, "maquequê") and y plants (cassava, Sweet potato and taro)	Project report

Fund Window 2: Preventing and responding to sexual and gender-based violence in the context of COVID-19
Excerpt from Results Framework developed by Recipient UN Organizations in Ghana

Window 2: Proposal Outcome	Outcome: Enhanced access to SGBV and anti-stigma information and essential services for vulnerable groups for effective prevention, mitigation, and response to COVID-19 impacts.			
		Baseline	Target	Means of verification
Outcome Indicator	3.1. Percentage of affected population with increased knowledge and utilization of SGBV and anti-stigma services disaggregated by sex, age, locality	0%	50%	End of year Report from DOVVSU/MoGCSP/CSOs
Outputs	3.1a Vulnerable women and girls have improved access to SGBV information, essential services and crisis support			
	3.1b Sustained and enhanced delivery of child protection services by national authorities during COVID-19			
	3.2 Communities and relevant institutions have enhanced awareness and capacity to prevent, mitigate and respond to COVID-19 related stigma and discrimination			
Output Indicators	3.1.1 (a & b) Number of women girls and boys reached with essential services	250 (April, 2020)	750 (Dec, 2020)	Statistics from Service Providers
	3.1.2 Number of community initiatives implemented on COVID 19, SGBV and SRHR including FP	0 (April, 2020)	20 (Dec, 2020)	Partners Reports
	3.1.3 Number of women and adolescent girls provided with dignity kits	1000 (2019)	2000 (2020)	Reports and Distribution lists
	3.1.4 Number of traditional and religious leaders engaged as change agents on SGBV prevention and reporting	0 (April, 2020)	30 (Dec, 2020)	Implementation Reports
	3.2.1 Number of community engagements to reduce stigma and discrimination implemented in each of the 5 COVID hotspots targeted	0 (April, 2020)	10 (Dec, 2020)	Reports on Community Engagements
	3.2.2 Number of rapid assessments on stigma and discrimination conducted	0(April, 2020)	2 (Dec, 2020)	Assessment Reports
	3.2.3 Functional mechanism to receive and address COVID-19 related stigma and discrimination in place	None in place	At least 1 in Place	Case Management Reports
	3.2.4 At least 3 of the 5 COVID hotspots targeted has a safe space for victims of stigma and discrimination	0 Community safe spaces	3 Community safe spaces	Report on the # of reported cases to community safe spaces

ANNEX 3: FREQUENTLY ASKED QUESTIONS

“As part of our gender analysis of the impact and implications of COVID-19 in our country it is difficult to obtain and cite relevant disaggregated data. What should we do?”

When identifying relevant disaggregated data to inform your analysis consider the following:

- i) Reaching out to the National Statistics Office or equivalent
- ii) Reaching out to other UNCT members and/or civil society partners to identify if they have relevant studies/datasets that can be cited
- iii) Engaging the UN Gender Theme Group (or equivalent) for guidance on available sex disaggregated data
- iv) Consult the compilation of indicators available on the COVID-19 and gender monitor hosted on UN Women’s Data Hub. <https://data.unwomen.org/resources/covid-19-and-gender-monitor>

“We don’t know what a “gender-sensitive” indicator would look like for this intervention area. Where can we go for further guidance?”

Further guidance may be available from the following sources:

- i) Your country UN Gender Theme Group or a regional equivalent
- ii) Gender experts within the relevant UNCT member leading on this intervention area
- iii) Gender experts within your own agency
- iv) Links provided in the ‘Resources’ section of this guide
- v) UNCT Gender Equality Marker Helpdesk available at: UNCT-GEM.helpdesk@unwomen.org

“How do we develop indicators that can capture gender equality results?”

Gender equality indicators should measure the following:

- differences in participation, benefits, outcomes, and impacts for women, men, boys, and girls;
- changes in gender relations (positive or negative)—that is, changes toward equality, or changes toward inequality between men and women, and between girls and boys; and
- how these changes impact on the achievement of development objectives, particularly economic growth, poverty reduction, and sustainable development.¹²

It is essential to phrase indicators so that results for women and girls can be compared with those for men and boys. Collecting sex-disaggregated information does not mean focusing only on information about women’s/girls’ participation and benefits. Without collecting and analyzing comparable data for men/boys, it is not possible to assess whether an initiative has been effective at targeting and benefiting both women/girls and men/boys according to their needs, and it is not possible to learn lessons about the effectiveness of strategies for advancing gender equality. The only exception to this rule is where a particular initiative is focused exclusively on women and girls, or on men and boys.

Additional assistance in identifying and developing gender equality indicators may be sought from the same sources as identified above for gender sensitive indicators.

¹² J. Hunt. 2011. Introduction to Gender Sensitive Monitoring and Evaluation. Unpublished training notes.

“Is a gender equality marker code of 3 better than 2?”

A gender equality marker code of 3 is not by definition better than a code of 2. Across the portfolio of interventions funded by the COVID-19 MPTF, a twin-track approach to gender equality and the empowerment of women and girls involves combining dedicated/targeted interventions to advance gender equality and the empowerment of women and girls (usually gender equality marker code 3) with robust gender mainstreaming throughout all (usually gender equality marker code 2). In the second, interim Call For Proposals, programmes that align with gender equality marker code 3 are actively encouraged given the Fund has established a financial target of 30% of the funding available (i.e., USD 6 million out of USD 20 million) to be allocated to programmes that have identified gender equality as the principal objective.

“We think the joint programme will only make a limited contribution to gender equality and/or the empowerment of women/girls but we are concerned that if we assign a gender equality marker code of 1 the Concept Note/proposal will not be reviewed favorably by the Fund. Is this the case?”

The COVID-19 MPTF Terms of Reference stipulate that funded initiatives need to address the gender implications of COVID-19 and design tailored actions to avoid gender-based discrimination. Therefore, joint programmes that align with a gender equality maker code of 1 are discouraged.

If you are unsure how to strengthen the consideration of gender equality and/or the empowerment of women/girls in your Concept Note or proposal, consider reaching out to the following for additional guidance and inputs prior to submission:

- i) Your country UN Gender Theme Group or a regional equivalent
- ii) Gender experts within the relevant UNCT member leading on the proposed intervention area(s)
- iii) Gender experts within your own agency
- iv) UNCT Gender Equality Marker Helpdesk available at: UNCT-GEM.helpdesk@unwomen.org

ANNEX 4: RESOURCES

Numerous thematic tools have been developed by UN organizations to guide the integration of gender considerations within COVID-19 socio-economic assessments and responses. A detailed list of gender related resources from various UN entities can be accessed through the [IANWGE compendium on integrating gender considerations in the response to COVID-19: Key messages and actions from UN entities](#). The resources below provide initial entry points and were compiled in July 2020. For updated resources please refer to <https://unsdg.un.org/resources>

UN Policy Brief: The Impact of COVID-19 on Women (9 April 2020)

https://www.un.org/sites/un2.un.org/files/policy_brief_on_covid_impact_on_women_9_april_2020.pdf

Minimum Requirements Checklist for Integrating Gender Equality in the Implementation of the UN Framework for the Socio-Economic Response to COVID-19. UN Inter-Agency Network on Women and Gender Equality (IANWGE) (July 2020)

<https://www.unwomen.org/en/digital-library/publications/2020/07/ianwge-minimum-requirements-checklist-for-integrating-gender-equality-in-covid-19-response>

IANWGE Compendium on Integrating Gender Considerations in the Response to COVID-19: Key Messages and Actions from UN Entities (July 2020)

<https://www.unwomen.org/en/digital-library/publications/2020/06/ianwge-compendium-on-integrating-gender-considerations-in-the-response-to-covid-19>

DATA AND INDICATORS:

Compilation of indicators: COVID-19 and gender monitor hosted on UN Women's Data Hub.

<https://data.unwomen.org/resources/covid-19-and-gender-monitor>

COVID-19 Global Gender Response Tracker (launched July 2020)

www.undp.org/covid-19-gender-dashboard

COVID-19: Emerging gender data and why it matters (26 June 2020)

<https://data.unwomen.org/resources/covid-19-emerging-gender-data-and-why-it-matters>

Tracking the Gender Impact of COVID-19: An Indicator Framework (May 2020)

<https://data2x.org/wp-content/uploads/2020/05/BRIEF-Tracking-Gender-Impact-of-COVID-19-v3.pdf>

Sex, gender and COVID-19: overview and resources

<https://globalhealth5050.org/covid19/>

THEMATIC/INTERVENTION AREAS:

The COVID-19 response: Getting gender equality right for a better future for women at work. ILO (May 2020)

https://www.ilo.org/wcmsp5/groups/public/---dgreports/--gender/documents/publication/wcms_744685.pdf

Gender-Responsive Social Protection During COVID-19, UNICEF Technical Note (23 April 2020)

<https://www.unicef.org/sites/default/files/2020-05/Gender-responsive-social-protection-during-covid-19-ENG.pdf>

Mitigating the effects of the COVID-19 pandemic on food and the nutrition of schoolchildren. Interim Guidance Note. WFP, FAO, UNICEF (7 April 2020)

https://docs.wfp.org/api/documents/WFP-0000114175/download/?_ga=2.45342508.921196342.1594128846-252921831.1594128846

Gender and COVID-19. WFP (14, April 2020)

<https://www.wfp.org/publications/gender-and-covid-19>

COVID-19: A Gender Lens. Protecting sexual and reproductive health and rights, and promoting gender equality. UNFPA (March 2020)

<https://www.unfpa.org/resources/covid-19-gender-lens>

Addressing the gender dimensions of school closures. UNESCO Education Issue Note (May 2020)

<https://unesdoc.unesco.org/ark:/48223/pf0000373379>

COVID-19 and Ending Violence Against Women and Girls. Issue Brief. UN Women (April 2020)

<https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/issue-brief-covid-19-and-ending-violence-against-women-and-girls-en.pdf?la=en&vs=5006>

COVID-19 Preparedness and Response: Gender Equality and Addressing Gender-Based Violence. UNFPA Interim Technical Brief (March 2020)

https://www.unfpa.org/sites/default/files/resource-pdf/COVID-19_Preparedness_and_Response_-_UNFPA_Interim_Technical_Briefs_Gender_Equality_and_GBV_23_March_2020_.pdf

Interim Guidance: Gender Alert for COVID-19 Outbreak (developed by the IASC Reference Group for Gender in Humanitarian Action) (31 March 2020)

<https://interagencystandingcommittee.org/inter-agency-standing-committee/interim-guidance-gender-alert-covid-19-outbreak-developed-iasc>

PMNCH Compendium of COVID-19 related partner resources on women's, children's and adolescents' health (covers areas such as nutrition, WASH, food security, social protection, SRHR, GBV, risk communication and community engagement)

<https://www.who.int/pmnch/media/news/2020/guidance-on-COVID-19/en/>

ANNEX 5: DEFINITIONS

Gender: Refers to the social attributes and opportunities associated with being male and female and the relationships between women and men and girls and boys, as well as the relations between women and those between men. These attributes, opportunities and relationships are socially constructed and are learned through socialization processes.

Gender equality: Refers to the equal rights, responsibilities and opportunities of women and men and girls and boys. Equality does not mean that women and men will become the same but that women's and men's rights, responsibilities and opportunities will not depend on whether they are born female or male. Gender equality implies that the interests, needs and priorities of both women and men, girls and boys are taken into consideration, recognizing the diversity of different groups of women and men, girls and boys. Gender equality is not a woman's or a girl's issue but should concern and fully engage men and boys as well. Equality between women and men, girls and boys, is seen as both a human rights issue and as a precondition for, and indicator of, sustainable people-centered development.¹³

Gender equality results: Results achieved for women compared with men, including participation in project or programme activities, access to project/programme and other resources, practical benefits, and strategic changes in gender relations. Gender equality results may be immediate or process results, intermediate results or outputs, or long-term results or outcomes.

Gender mainstreaming: The process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in all areas and at all levels. It is a strategy for making women's as well as men's concerns and experiences an integral dimension of the design, implementation, monitoring and evaluation of all policies and programmes in all political, economic and societal spheres, so that women and men benefit equally and inequality is not perpetuated. The ultimate goal of gender mainstreaming is to achieve gender equality.¹⁴

Gender-sensitive indicators: Are indicators that track gender related changes over time. They point to changes in the status and roles of women and men/girls and boys over time and how a project or interventions affects them. A key element of a results framework is the indicators that are selected to measure progress on delivering outputs and achieving outcomes and impact to include both age and gender-sensitive as well as sex-specific/sex-disaggregated qualitative and quantitative indicators or data collection methods. Without this information it is difficult to monitor progress on advancing gender equality or women's empowerment.

¹³ OSAGI (now UN Women): Concepts and definitions:
<http://un.org/womenwatch/osagi/conceptsanddefinitions.htm>

¹⁴ Agreed Conclusion of ECOSOC Coordination Segment on Gender Mainstreaming, A/52/3, 1997

