

**المتدى العربي للتنمية المستدامة**

إسراع العمل نحو خطة عام 2030 ما بعد كوفيد

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# **SDG 5**

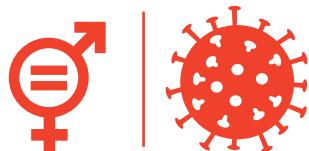
## **GENDER EQUALITY**

Achieve gender equality  
and empower all women  
and girls

Arab countries have made measurable progress in increasing women and girls' access to health services and education (SDGs 3 and 4). However, discriminatory laws and legal practices, biased social and cultural norms, and structural barriers to gender equality remain entrenched (SDGs 10 and 16). Women's economic participation is particularly lagging, especially among young women (SDGs 1 and 8). As a result, women often face constraints on their independence and full

human rights, including playing an active role in decision-making, at home and in the public sphere. The impact of the COVID-19 pandemic on women and girls has been profound, with anecdotal evidence highlighting a further increase in the vulnerability of women's employment and in violence against women. Women's full political and economic participation and enjoyment of their fundamental rights are critical to achieving SDG 5 and all other SDGs by 2030.

## Impact of COVID-19 on SDG 5 in the Arab region



Women's experience of intersectional inequality is heightened during crises. Due to the pandemic, women and girls across the Arab region are contending with economic, social and physical vulnerabilities, and their access to services and resources has been limited further. It is more important than ever that women's leadership is acknowledged and advanced, to ensure that the pandemic recovery process is fully inclusive of the fundamental rights of women and girls.

**Violence against women and girls has increased in severity and scale.** This increase is partly due to the confinement measures deemed necessary to control the spread of COVID-19, thus limiting survivors' ability to distance themselves from abusers in their households and to access external support. Food insecurity and loss of livelihoods have also contributed to intrahousehold tensions and increased violence. The most prevalent types of violence observed by women and girls in the region are emotional abuse (79 per cent), physical violence (55 per cent), and denial of resources (53 per cent), followed by sexual violence (32 per cent), discrimination (31 per cent), threat of deportation or eviction (15 per cent), and child marriage (4 per cent).<sup>1</sup>

**Women's access to vital sexual and reproductive health services were impacted in a number of countries,** including

for women subjected to violence, as health resources and medical supplies were diverted to respond to the pandemic, thus leaving other essential services heavily under-resourced and dysfunctional.

**Girls are at a higher risk of child, early and forced marriage and of female genital mutilation (FGM).** Increased risk is observed in tandem with the closure of schools and the suspension of school meals programmes owing to the pandemic. In Jordan, the rates of child marriage, particularly among refugee communities in Azraq and Zaatari camps, have reportedly increased due to the loss of informal employment opportunities and increased food insecurity. In Somalia, survey findings indicate an upsurge of FGM, with 31 per cent of respondents noting a significant increase in FGM incidents compared with the pre-COVID-19 period.<sup>2</sup>

**Women's susceptibility to contracting COVID-19 is high.** The high concentration of women in informal employment and in health care and social services, dominated by female nurses, midwives and support staff, increase women's exposure to COVID-19. Moreover, caring for family members with COVID-19 also increased women's exposure, as health systems became overwhelmed with the virus.

1 UN-Women, Violence against Women and Girls and COVID-19 in the Arab Region, 2020.

2 Ibid; and WFP Jordan, Food Security Situation of Refugees in Camps and Communities, September 2020.

*The challenges that female migrant workers, particularly domestic workers, face in accessing services have increased owing to the pandemic and movement restrictions. Many are also at risk of losing their source of income or are under pressure to perform tasks that put them at increased risk of contracting COVID-19. This is especially the case for women employed under the sponsorship (kafala) system. In Lebanon, for instance, as a result of the deteriorating economic situation, many employers have stopped paying migrant domestic workers, turning many out onto the streets often without access to their identity documents.*

**Women's care and work burden has increased.** The mass shutdown of childcare facilities and schools across the region has further increased care needs and impacted women disproportionately given that they bear the brunt of the care work burden,<sup>3</sup> performing three to five times more care work than men. The pandemic has also increased working women's double burden, leaving many working mothers

with little choice but to take time off, or to try to work from home while caring for their children.

**Women's economic participation has weakened.** Women's economic participation in the Arab region is the lowest in the world at 25 per cent in 2015, compared with a world average of around 50 per cent, with 38 per cent of women workers in the region being in vulnerable employment.<sup>4</sup> The pandemic has worsened the situation, posing a serious threat to women's engagement in economic activities in general, especially affecting daily workers in the informal sector and in economic sectors hit hard by the pandemic, including small and medium enterprises. Estimates show that women globally have been more affected than men by employment loss owing to the pandemic, and are more likely to drop out of the labour force.<sup>5</sup>

**Access to services for women are challenged by the gender gap in Internet use,** which increased from 17.4 per cent in 2013 to 24.4 per cent in 2019.<sup>6</sup> This has posed problems for girls and young women in continuing their education during periods of restricted movement. Moreover, providing services to survivors of violence remotely has proved difficult given that service providers are not always trained to do so, with an impact on the quality of services rendered.

## Measures taken by Arab Governments

**1. Many Arab countries have adopted gender-sensitive measures in response to COVID-19, mostly addressing violence against women.**<sup>7</sup> These measures include establishing shelters and providing other essential services for survivors, such as accessible hotlines and police and judicial responses; implementing awareness-raising campaigns; and enhancing the collection and use of data on violence against women in the context of COVID-19.<sup>8</sup>

In Jordan, an emergency response team, including female police officers, was formed and trained to respond to the crisis by conducting home visits to

gender-based violence survivors, so as to safely refer them to essential services, including psychosocial support. In Lebanon, the National Commission for Lebanese Women, in cooperation with the Internal Security Forces, set up a new domestic violence hotline. Only Egypt and the State of Palestine have taken measures to improve the collection and use of data on violence against women in the COVID-19 context. In the State of Palestine, for example, the Family and Juvenile Department collect data on a monthly basis and compare them with the same period last year to track trends in cases of violence against women and girls.

3 UN-Women, The Role of the Care Economy in Promoting Gender Equality, 2020.

4 ESCWA, Arab Sustainable Development Report, 2020.

5 International Labour Organizations, ILO Monitor: COVID-19 and the World of Work, 2021.

6 ESCWA, Arab Sustainable Development Report 2020, 2020, p. 217.

7 The following 13 countries adopted such measures: Algeria, Bahrain, Egypt, Iraq, Jordan, Kuwait, Lebanon, Morocco, Saudi Arabia, the State of Palestine, the Syrian Arab Republic, Tunisia and the United Arab Emirates.

8 UNDP and UN-Women (2020). COVID-19 Global Gender Response Tracker - Factsheet: Northern Africa and Western Asia.

**2. Few of the measures target women's economic security, and very few deal with the issue of unpaid care work.<sup>9</sup>** Social protection programmes, mostly cash transfers, were used to ensure economic security for women. Labour market measures were also used to support women's economic participation. Only eight measures were adopted across six countries in the region to support unpaid care, including flexible work arrangements and paid leave for parents with children.

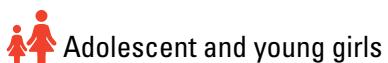
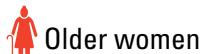
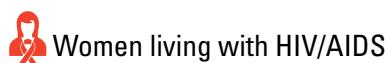
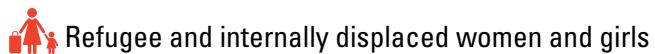
In Egypt, 21 of 38 measures taken to respond to COVID-19 are coded as gender-sensitive. This includes seven measures targeting women's economic security, three measures addressing unpaid care work, and 11 measures responding

to violence against women. Cash transfers and food assistance have proven to be important measures for social protection. The Ministry of Social Solidarity is planning to add 60,000 families to the Takaful and Karama cash-transfer programmes, with another 100,000 households to be added in the budget for the 2021 fiscal year. These programmes mainly target women heads-of-households. Labour market measures have also been adopted to support women's economic participation. In Morocco, the Ministry of Tourism, Handicrafts, Air Transport and Social Economy has introduced a certification system for cooperatives to produce 30,000 reusable masks per day. Some 15 cooperatives have been certified with a total of 103 members, all of whom are women.

## Most at risk of being left behind

Women in the region suffer from intersecting inequalities and entrenched discrimination, putting them at a higher risk of being impacted by the repercussions of the COVID-19 crisis. Their low economic participation, overrepresentation in the informal sector with no social benefits, limited access to financial resources, and family care responsibilities have made them more vulnerable

to the effects of the pandemic, exacerbating existing inequalities. Confinement and loss of income have also increased the incidence of harmful practices and violence against women and girls, further impeding the full realization of their fundamental rights.<sup>10</sup> Consequently, various demographic groups of women and girls are at risk of being left behind, including the following:<sup>11</sup>



<sup>9</sup> Ibid.

<sup>10</sup> United Nations, Policy brief: the impact of COVID-19 on women, 2020.

<sup>11</sup> ESCWA, Arab Sustainable Development Report, 2020.

## Policy recommendations for ensuring an inclusive recovery and achieving SDG 5 by 2030

The Arab Sustainable Development Report 2020 identifies the following recommendations to accelerate the achievement of SDG 5 in the region and support action

on other SDGs. These recommendations also facilitate the COVID-19 recovery, and enhance resilience to future shocks and crises.<sup>12</sup>

Enhance political commitment to gender equality, and introduce and strengthen legislation to end all forms of discrimination against women and girls

Eliminate all discrimination in women's economic participation, and increase women's economic independence and access to resources

Promote social and behavioural change and enable civil society and grassroots engagement on women's rights

Implement the region's commitments to sexual and reproductive health and reproductive rights in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform of Action

Improve data and statistics to reflect the lived realities of women and girls

Strengthen institutional capacity and allocate adequate human and financial resources to national women's machineries and relevant institutions

12 For a comprehensive analysis of these recommendations, see ESCWA, Arab Sustainable Development Report, 2020.



# Key facts on SDG 5

## ARAB REGION

## WORLD

### Proportion of seats held by women in national parliaments



**18%** of seats were held by women in 2019  
**+8% since 2000**

**25%** of seats were held by women in 2019  
**+3% since 2000**

### Proportion of seats held by women in deliberative bodies of local government



**18%** of seats were held by women in local government in 2019

**36%** of seats were held by women in local government in 2019

### Proportion of women in managerial positions



**9%** of women were represented in managerial positions in 2019  
**0% since 2000**

**28%** of women were represented in managerial positions in 2019  
**+1% since 2000**

### Proportion of girls and women aged 15-19 years who have undergone female genital mutilation/cutting

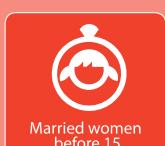


**55%** of women had undergone female genital mutilation/cutting in 2019

#### Africa

**32%** of women had undergone female genital mutilation/cutting in 2019

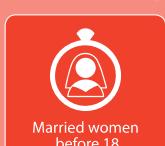
### Proportion of women aged 20-24 years who were married or in a union before age 15



**5%** of women were married before age 15 in 2019

**5%** of women were married before age 15 in 2019  
**-3% since 2004**

### Proportion of women aged 20-24 years who were married or in a union before age 18



**20%** of women were married before age 18 in 2019

**20%** of women were married before age 18 in 2019  
**-1% since 2004**

## ARAB REGION

## WORLD

### Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care



**59%** of women made informed decisions regarding sexual relations, contraceptive use, and reproductive health care in 2020

**55%** of women made informed decisions regarding sexual relations, contraceptive use, and reproductive health care in 2020

### Proportion of women aged 15-49 years who make their own informed decisions regarding contraceptive use



**92%** of women made informed decisions regarding contraceptive use in 2020

**91%** of women made informed decisions regarding contraceptive use in 2020

### Proportion of women aged 15-49 years who make their own informed decisions regarding reproductive health care



**92%** of women made informed decisions regarding reproductive health care in 2020

**75%** of women made informed decisions regarding reproductive health care in 2020

### Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations



**68%** of women made informed decisions on sexual relations in 2020

**75%** of women made informed decisions on sexual relations in 2020

Source: ESCWA Arab SDG Monitor. <http://arabsdgmonitor.unescwa.org>. (Figures have been rounded).