



**Closing the Funding Gap for
Women-Focused Organizations Responding to
COVID-19 in Asia and the Pacific**



GENDER
IN HUMANITARIAN ACTION
Asia and the Pacific

KEY MESSAGES

1. The COVID-19 pandemic has exacerbated the needs of women, girls and persons of diverse sexual orientations, gender identities and expressions, and sex characteristics. Women-focused organizations (WFOs) play a critical role in meeting the immediate needs of women in those communities and responding to pre-existing gender inequalities and new operational challenges arising from the pandemic.
2. As of mid-July, there have been zero direct donor contribution to local WFOs through the COVID-19 Global Humanitarian Response Plan in Asia. Donors should target and urgently channel funding to local WFOs.
3. Targeting funding towards WFOs is critical to reach the “last mile” and leave no one behind.
4. Data show persistent underfunding to initiatives for gender equality and to prevent and respond to gender-based violence (GBV) in humanitarian action globally, yet such funding provides many returns. Global studies show a return of between \$1.70 and \$150.00 for every dollar spent on programming for women and girls, with a median value of \$8 for every dollar spent.

KEY RECOMMENDATIONS

1. Invest where it makes a difference: fund WFOs in the region

To donors:

- Increase direct, flexible, multi-year and adaptive funding to well-structured and effective WFOs, including GBV service providers and representative organizations of women in the Asia-Pacific region. Direct funding will limit overhead costs and allow WFOs to grow and increase their capacity to deliver.
- Donors that are unable to provide direct funding may contribute through funding appeals serving WFOs such as the Women's Peace and Humanitarian Fund.

To humanitarian leadership:

- Prioritize national non-governmental organizations (NGOs) in the allocation of country-based pooled funds, and earmark funding for WFOs. In line with the [Interim Guidance on Localisation and the COVID-19 Response](#), issued by the Inter-Agency Standing Committee, humanitarian leadership should advocate for local and NGOs, including women's rights and women-led local organizations and other CSOs targeting or representing marginalized groups, to be fully included in balanced and impartial pooled funding decisions on allocations. In light of the challenges faced by WFOs to access country-based pooled funds, Country Teams should appoint a focal point to support their applications.
- Ensure that WFOs benefit from the \$300 million of unallocated supplementary funding for

NGOs under the COVID-19 Global Humanitarian Response Plan.

- Improve tracking and reporting of funding to WFOs on the OCHA Financial Tracking Service.

2. Listen to providers on the ground: involve women in response planning

To humanitarian leadership:

- Support the consistent, meaningful and active participation and inclusion of local actors, in particular WFOs in cluster/sector coordination groups, strategic advisory groups and/or other response planning teams and working groups at the regional, national and subnational levels, as recommended by the [Inter-Agency Standing Committee](#).
- Designate a gender focal point within the team leading the 2021 Humanitarian Response Planning Process who will be responsible for reaching out to WFOs and ensuring that they are involved in the response planning.

3. Invest smart: think longer term and give priority to prevention

To donors:

- Provide multi-year funding for gender-transformative work, specifically targeting women and girls, and engaging men and boys to discuss women's rights, gender roles and women's contributions, that will minimize women's vulnerability alongside addressing gender inequalities. This would ultimately reduce the costs of future intervention.

INTRODUCTION ●

In the first six months of the COVID-19 pandemic, the disproportionate impact on women and girls has been severe across the region. As previously highlighted in a [regional analysis](#), the pandemic has particularly affected women and girls by exacerbating burdens of unpaid care work, increasing risks of gender-based violence (GBV), impacting livelihoods of women disproportionately especially in the informal sector, and reducing access to sexual and reproductive health. At the same time that the pandemic heightens the needs and vulnerabilities of women and girls, women-focused organizations (WFOs) that serve them have highlighted severe operational and funding challenges. Those challenges threaten to roll back hard-earned gains in gender equality, women's participation in decision-making, and the empowerment of girls in the region. As early as April 2020, 71 per cent of WFOs reported that COVID-19 was affecting them somewhat or very negatively, with 12 per cent suspending activities altogether.¹ Similar trends persist for organizations serving diverse gender populations. The Asia-Pacific Transgender Network reported that all of their project partners expressed concern about how to sustain operational costs of their organizations² which provide critical services to transgender people in the region. The Southeast Asia Sexual Orientation, Gender Identity and Expression Caucus (ASEAN SOGIE Caucus) reported that donors supporting several groups focused on lesbian, gay, bisexual, transgender and intersex (LGBTI) people had backed out from agreed funding, placing organizational continuity at risk in a time where services are most needed.³

Evidence from humanitarian action as well as the agenda for women, peace and security underscores the benefits of gender equality-based approaches to programming, including in recovery from crises. In humanitarian action, including recovery, gender-responsive humanitarian programming is correlated with increased access to education and positive education outcomes for both boys and girls, improved access to water, sanitation and hygiene services, improved food security and improved gender equality.⁴ The agenda for women, peace and

security has shown that when women participate, the needs and priorities of affected women and girls are better addressed, as are the socioeconomic impacts on communities as a whole. Finally, the benefits of women's leadership are clear: ActionAid research shows that women's leadership can enhance humanitarian response to the benefit of communities⁵ and CARE has shown that states with more women in leadership are more likely to deliver COVID-19 responses that consider the effect of the crisis on women and girls.⁶ Data show persistent underfunding to initiatives for gender equality and for GBV prevention and response in humanitarian action globally, yet such funding provides many returns. Global studies show returns that range between \$1.70 and \$150 for every dollar spent on programming for women and girls, with a median value of \$8 for every dollar spent.⁷

Structure of the Report

This brief includes four sections. The methodology and limitations of each one are summarized as follows.

- 1. Visibility scan of available response plans:** The Gender in Humanitarian Action Working Group conducted an analysis of 20 country response plans across the region, including COVID-19 response plans as well as a few other individual country preparedness and response plans to evaluate how the heightened risks and vulnerabilities for women, girls and members of the LGBTIQ community during the COVID-19 pandemic are reflected in adequate programming and funding.
- 2. Tracking the funding flow for the COVID-19 Global Humanitarian Response Plan in Asia** in the [OCHA Financial Tracking Service](#). Limitations include underreporting, unavailability of high quality data on funding flows (notably to track the funding subgranted from international organizations and United Nations agencies to national NGOs), as well as the lack of consistent indicators to track the funding for GBV and gender-related interventions, or WFOs.

1 UN Women (2020). [Rapid Assessment: Impact of COVID-19 on Women's Civil Society Organizations](#).

2 Asia Pacific Transgender Network (2020). [#SeeUsSupportUs: COVID-19 Rapid Assessment Findings](#).

3 ASEAN SOGIE Caucus (2020). [Impacts of COVID-19 on LGBTIQ Organizations in the Southeast Asia Region](#).

4 UN Women (2015). [The effect of gender equality programming on humanitarian outcomes](#).

5 Action Aid (2016). [On the Frontline: Catalysing Women's Leadership in Humanitarian Action](#).

6 Care (n.d.). [Where are the Women? The Absence of Women in COVID-19 Response teams and plans and why we need them](#).

7 UNFPA and UN Women (2020). [Funding for Gender Equality and the Empowerment of Women and Girls in Humanitarian Programming](#), p. 37.

3. Analysis of the Inter-Agency Standing Committee (IASC) Gender with Age Marker: an analysis made available by IASC and the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), considered the Gender with Age Marker data for humanitarian projects (both before and during the COVID-19 pandemic) in Afghanistan, Bangladesh, Myanmar and Pakistan, with an in-depth look at influence and benefits. A limitation of the Gender with Age Marker is that it only indicates intent to integrate gender and age, but the data nevertheless provide an indication of diverse participation in planning for humanitarian action at the project level.

4. Session with WFOs in the region: the Gender in Humanitarian Action Working Group convened a listening session to hear from diverse WFOs and networks on 20 July 2020. The diverse women's organizations, including those representing refugee women, home-based workers, LGBTI people, women with disabilities, rural women and adolescent girls, identified both the ways their organizations are responding to the crisis as well as their key advocacy messages for funding for COVID-19 response in the region.

PLANNING FOR GENDER – A VISIBILITY SCAN ●

The Gender in Humanitarian Action Working Group conducted an analysis of 20 humanitarian and multisector plans in response to COVID-19⁸ across the Asia-Pacific region. Two thirds of the plans included components of GBV prevention and response, and more than half include elements of sexual and reproductive health. This is in line with recommendations that both GBV and sexual and reproductive health services are to be included among services prioritized by governments as essential during COVID-19. However, critical elements of programming for gender equality and GBV prevention and response are included in fewer plans. Less than half of the documents assessed (45–50 per cent) mention the collection and use of sex-, age- and disability-disaggregated data and the need to conduct gender analysis. One quarter (25 per cent) of the plans makes no mention of any form of engagement of women's group and networks, or women's leadership in planning and implementation, while 30 per cent of the plans limit it to certain sectors and clusters, mainly risk communication and community engagement, protection and prevention of GBV, sexual and reproductive health, mental health and psychosocial support, and early recovery.

8 Plans analysed included the following: Afghanistan COVID-19 Multi-Sector Humanitarian Country Plan; Bangladesh Multisectoral Action Plan for COVID-19; Cambodia Response Plan for COVID-19; Indonesia Multi-Sectoral Response Plan to COVID-19; Malaysia One-UN Plan of Multisectoral Support to COVID-19; Maldives COVID-19 Preparedness and Response Plan; United Nations Country Team Mongolia COVID-19 Preparedness and Response Plan; Myanmar Country Preparedness and Response Plan; Nepal Preparedness and Response Plan; Pacific Humanitarian Team COVID-19 Response Plan; Pakistan Intersectoral COVID Response Plan 2020; Papua New Guinea COVID-19 Multi-Sector Response Plan; Sri Lanka Preparedness and Response Plan COVID-19; Rohingya Crisis Joint Response Plan; Iran Country Preparedness and Response Plan; Timor-Leste COVID-19 Outbreak Multi-Sectoral Response Plan; and United Nations Country Team Viet Nam COVID-19 Response Support Plan.

The results of the visibility scan indicate the following needs: 1) to improve the quality of the responses by systematizing the use of gender analyses and sex-, age- and disability-disaggregated data to meaningfully inform the planning process; and 2) to mainstream GBV risk mitigation and gender equality across all sectors and beyond those that traditionally target women and girls. Additional focus should be placed on the involvement and engagement of women's groups in planning and implementation, as this not only strengthens gender mainstreaming but also serves localization efforts in the context of COVID-19.

GOOD PRACTICES IDENTIFIED IN THE VISIBILITY SCAN:

- Gender equality and women's empowerment, including the collection and use of sex-, age- and disability-disaggregated data as a strategic objective of the plan
- Explicitly naming women's organizations and networks as part of the appeal, with clear financial allocations dedicated to them

FUNDING TO WOMEN-FOCUSED ORGANIZATIONS IN THE COVID-19 RESPONSE

As of 16 July 2020, the OCHA Financial Tracking Service showed that the Global Humanitarian Response Plan for COVID-19 has raised a total of \$1.74 billion, yet only \$18,724,205 (1 per cent of the total raised) had been allocated to national or local NGOs.⁹ Out of that already small amount, it is likely that WFOs have received only a small portion.

An analysis of the funding flow for the COVID-19 Global Humanitarian Response Plan in Afghanistan, Cox's Bazar and Myanmar shows that, as of 9 July 2020:

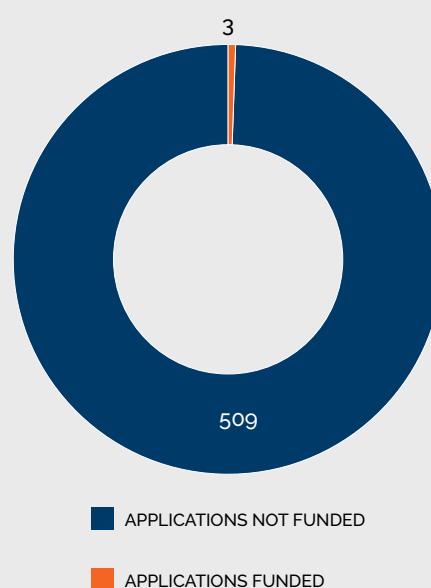
- There have been zero direct donor contributions to national NGOs.
- In Afghanistan, only 8 per cent of the country-based pooled fund allocation has gone directly to national NGOs.
- Via the Central Emergency Response Fund, country-based pooled funds or direct donor contributions under the COVID-19 Global Humanitarian Response Plan, United Nations agencies have received a minimum of \$130 million, international organizations have received \$20 million and national NGOs have received only \$2.5 million. The amount subgranted from the United Nations and international organizations to national NGOs is unknown, but based on the global funding figures provided by a few United Nations agencies in the progress report of the COVID-19 Global Humanitarian Response Plan, the amount is extrapolated to be quite low.
- Few national NGOs have received funding, and none of them are focused on women.

A number of factors may contribute to the low donation figures.¹⁰ and so far the response is far from reaching the commitment of securing "at least 25 per cent of

humanitarian funding to local and national responders as directly as possible to improve outcomes for affected people and reduce transaction cost". Funding to national and local NGOs as part of the COVID-19 Global Humanitarian Response Plan appears low and is often very difficult to track. In particular, funding provided to WFOs is difficult to trace, highlighting the need to improve financial reporting and tracking mechanisms.

While the Global Humanitarian Response Plans and other appeals are not the only funding sources for the COVID-19 response, data from elsewhere also suggest that demand for funding from WFOs far exceeds the funding committed. The Women's Peace and Humanitarian Fund received 4,760 applications during its first Emergency Response Window, it and was only able to fund 12 of them. In all, 512 proposals received from Asia and the Pacific, but only three projects were approved for funding due to underfunding of the Women's Peace and Humanitarian Fund itself, underscoring the need for targeted and direct funding to support women and meet this overwhelming need.

Women's Peace and Humanitarian Fund applications from Asia and the Pacific



9 OCHA Financial Tracking Service, accessed 7 July 2020.

10 First, The COVID-19 Global Humanitarian Response Plan was initiated in March 2020 as a funding appeal. NGOs were included starting in April 2020. Funding towards the COVID-19 Global Humanitarian Response Plan increased rapidly and steadily in March and April, with a much slower pace in May and June when the NGOs were integrated into the process. Second, there is inconsistent reporting on the OCHA Financial Tracking Service, including by NGOs.

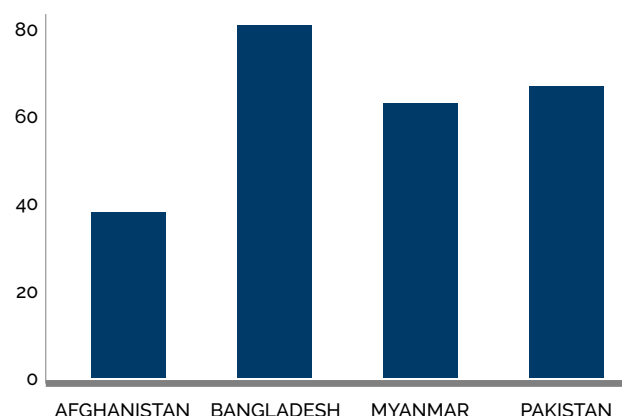
DIVERSE PARTICIPATION IN HUMANITARIAN PLANNING, INCLUDING FOR COVID-19 RESPONSE

Diverse participation is critical to inform programming, and the visibility scan revealed that COVID-19 response plans in the region represent a mixed picture for progress. While the majority of plans indicated an intention to include women's networks, a significant proportion of them intended to do so only in risk communication, protection, health or early recovery. This points to a need to advocate for gender mainstreaming across other sectors to ensure all equally serve women and girls.

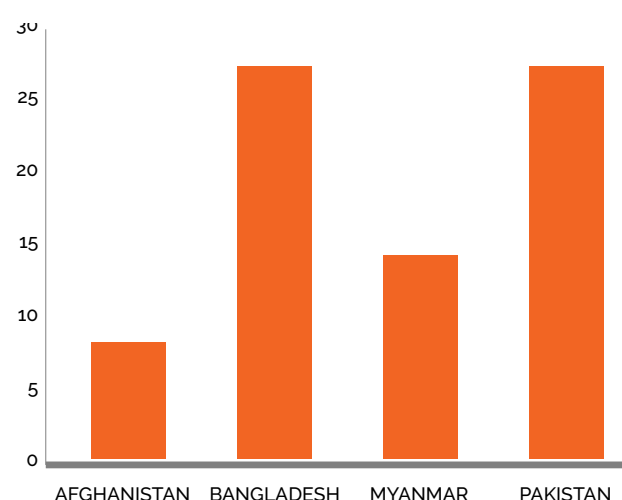
The IASC and the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), provided Gender with Age Marker data for 697 humanitarian projects (both before and during the COVID-19 pandemic) in Afghanistan, Bangladesh, Myanmar and Pakistan in 2019 and 2020.¹¹ The data enable an in-depth look at influence and benefits in humanitarian planning for people of different ages and genders.¹²

The analysis reveals that the intent to engage adolescents in humanitarian projects is mixed. More than 80 per cent of projects in Bangladesh intended to engage adolescents compared to 40 per cent of projects in Afghanistan. For communities of LGBTIQ people, these numbers are significantly lower. Nearly 30 per cent of humanitarian projects in Bangladesh and Pakistan intended to engage LGBTIQ persons in programming, compared to only 9 per cent in Afghanistan and 14 per cent Myanmar, highlighting a specific gap that many of the organizations today help bridge and fill – and they need to be well-resourced to do so.

% of humanitarian projects intending to engage adolescents



% of humanitarian projects intending to engage LGBTIQ persons



11 We thank Deborah Clifton, for IASC/OCHA, and UNICEF for facilitating access to Gender with Age Marker data and analysis. The IASC Gender with Age Marker has twelve Gender Equality Measures (GEMS).

12 The analysis included the criteria of GEM G - people of appropriate ages participate in design AND review of the project AND their suggestions are incorporated, and GEM J - there are distinct benefits for persons of all genders in different age groups as a result of activities adapted to different needs or barriers. For more information, please see an overview of the IASC Gender with Age Marker at <https://www.iascgenderwithagemarker.com/en/home/>.

PERSPECTIVES FROM WOMEN-FOCUSED ORGANIZATIONS

The Gender in Humanitarian Action Working Group convened a virtual “listening session” on the state of gender and funding in the COVID-19 response on 20 July 2020 with representatives of the following organizations and networks serving diverse women who shared their views: Voice of Women Organization, HER Pakistan, ASEAN Feminist Lesbian, Bisexual and Queer Network, South Asia Disability Forum, RW Welfare Society, Karenni National Women’s Organization, HomeNet South Asia, Pambansang Koalisyon Ng Kababaihan Sa Kanayunan (PKKK). The participants discussed both the ways their organizations are responding to the crisis as well as their key advocacy messages for funding for COVID-19 responses in the region. This section provides a summary of the discussion and key messages.

Key message 1: The pandemic has exacerbated pre-existing gender inequalities and the needs of women and girls, and added new operational challenges for WFOs.

Across the board, organizations serving diverse women and girls have identified ways the COVID-19 pandemic has exacerbated existing needs and caused new needs to emerge:

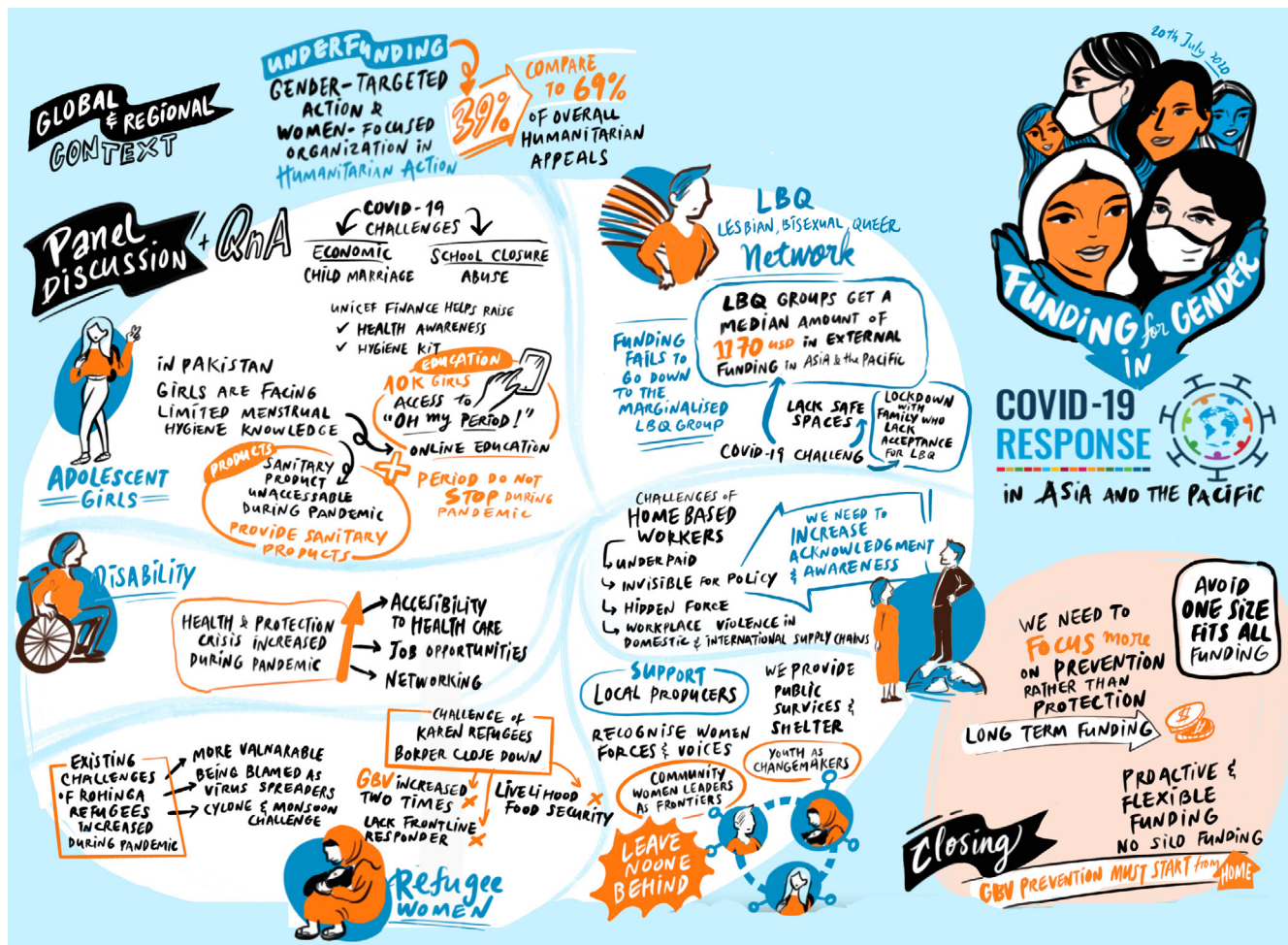
- Increases in GBV in the home, coupled with reduced access to GBV services. This includes heightened risks of violence for lesbian, bisexual and queer women locked down in unsafe households;
- Barriers to accessing life-saving messages and information on COVID-19, in particular for women with disabilities;
- Structural barriers to accessing health care and essential services;
- Increased barriers to accessing menstrual hygiene management supplies;
- Increased risks of child and early marriage and teenage pregnancy, in particular in countries where child and early marriage rates were already high pre-pandemic;
- Severe impacts on livelihoods, coupled with an increasing burden of unpaid care work;
- Limited investment in closing the digital gender gap and providing accessible online livelihood opportunities, especially for women with disabilities;

- Harassment of women human rights defenders;
- Increased risks of sexual exploitation and abuse, in particular for adolescent girls and home-based workers;
- Exclusion of marginalized women in government policies, in particular for home-based workers who faced sharp reductions in remunerative work during the pandemic, yet were not able to access social safety nets;
- Limited control over the use of COVID-19 relief items distributed at the household level, in particular for rural women.



Photo: UN Women/Mohammad Rakibul Hasan

These responses are captured in the graphic illustration.



At the same time that the needs of the communities that they serve have increased, WFOs face key operational challenges exacerbated by the pandemic. These key challenges include the need to invest in adaptations to offer remote or mobile service delivery, limitations on operating hours, new barriers to reach women with limited mobility, and constraints that prevent them from using earmarked funding to respond to these emerging needs.



Key message 2: Despite operational challenges, existing relationships with communities, strong partnerships and flexible funding have enabled WFOs to meet new and increased needs of women and girls.

KEY EXAMPLES: HOW ARE WFOs RESPONDING?

WFOs are responding to the pandemic and contributing to Global Humanitarian Response Plan objectives by doing the following:

- Providing critical and life-saving GBV services, including operating hotlines and shelters, and raising awareness on GBV services;
- Organizing into cooperatives or producer companies to reinvent supply chains, reskill women home-based workers, and shift home-based work to meet needs such as mask or medical gown production;
- Fundraising at the community level to deliver food, aid and health care to marginalized groups of women and girls;
- Seeding banking and supporting clusters of women farmers to preserve seeds and food culture to ensure food security for rural women in the Philippines;
- Providing financial assistance to women with disabilities and supporting them to access online work for livelihoods during the pandemic;
- Developing a one-stop solution that provides education using a chatbot, free tele-gynecology services and an e-commerce platform for all sexual and reproductive health needs for adolescent girls in Pakistan;
- Creating awareness materials for women home-based workers on violence and how they can tackle the issue during this time of crisis across South Asia.

Key message 3: Investing in targeted funding towards WFOs is critical to reaching the “last mile” and leaving no one behind

Pre-pandemic, WFOs already operated on limited budgets, in particular organizations that were less likely to be registered officially with the Government (for example, organizations serving refugees or LGBTI people¹³) and those organizations with a limited ability to access external funding. For example, the Astraea Foundation reported that median external funding of organizations serving lesbian, bisexual and queer women in Asia and the Pacific was only \$1,170 between 2017 and 2018, and 70 per cent of lesbian, bisexual and queer organizations are unable to legally register, which limits their ability to access funding¹⁴. For individual women, PKKK has highlighted the lack of remuneration for women community volunteers providing health services, as their work may be considered an extension of their (unpaid) care work at home.

The COVID-19 pandemic has exacerbated funding challenges, rendering organizations dependent on funding earmarked for advocacy unable to use existing funding to meet new emerging needs. Some organizations lack multi-year funding, and so they are unable to fully pivot to meet new needs. Yet despite these challenges, many organizations have continued to find ways to continue serving and supporting women in their communities.

New and continued flexible, multi-year investments in WFOs will enable women’s participation in decision-making at all levels, in line with the principle of “nothing for us without us”. Such funding would allow WFOs to invest in targeted, needs-based actions, such as investing in technology, accessibility and capacity strengthening for women with disabilities and home-based workers, and connect them to livelihoods opportunities and life-saving information on COVID-19. Finally, enabling diverse WFOs to use funding to invest in mitigating security risks and strengthen operational capacities and harm reduction, including to address burnout, would go a long way towards ensuring the communities they serve are not left behind.

13 See <https://outrightinternational.org/righttoregister>.

14 Astraea Foundation (2019). Vibrant Yet Under-resourced: The State of Lesbian, Bisexual & Queer Movements. <https://fundlbq.org/>

"Youth have intersecting identities and specific concerns, but we also have our voice, our contributions. The digital technology is not accessible to all. The youth try to bridge this gap and support adults. We have a lot of potential and when nurtured, we can do more." – *Marian Grace L. Ticzon, PKKK*

"We know the UN has provided guidelines on disability inclusion in COVID-19 response, but they are not in an accessible format, including for blind people. There is a huge information gap, and we need to focus on providing information that is accessible for all." – *Abia Akram, South Asia Disability Forum*

"Supporting rapid response funding through women's funds and foundations includes challenging the development humanitarian divide and championing the reallocation of development funding to support the humanitarian responses where necessary." – *Maw Day Myar, Karenni Women's Organization*

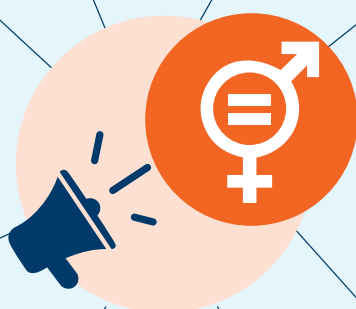
"With additional funding, we are now able to reach women and girls, including through health awareness campaigns like mobile door-to-door visits, provision of information on GBV services and COVID-19 resources. During the pandemic, we provide a safe haven for women through family guidance centres that provide legal advice." – *Diana Raofi, Voice of Women Organization*

"There is a need to invest more deeply on the issues faced by women home-based workers, and not only look at it as a COVID-19 response. The issues that women home-based workers are facing during the pandemic are not new; they are a more aggravated form of issues faced by them. And, there is an investment required to work on these issues more deeply." – *Janhavi Dave, HomeNet South Asia*

"56 per cent of lesbian, bisexual and queer women organizations have never received multi-year funding, and less than 22 per cent receive unrestricted funding. Donors should provide flexible and unrestricted funding for groups to pursue their own agenda, to respond to changing circumstances, such as COVID-19, and to invest in their own capacities and harm reduction, such as measures to address burnout and security risks." – *Jean Chong, ASEAN Feminist Lesbian, Bisexual, and Queer Network*

"When we talk about menstruation, we're talking about much more than pads and tampons—we're talking about rights and access to education, opportunities and health care. With so much at stake – and so much to gain – funding menstrual health is one of the most strategic, cross-cutting and impactful investments that a funder can make." – *Sana Lokhandwala, HER Pakistan*

"The resources that we have are so small. We offer commitment, trust, challenge and knowledge, and we ask you to offer the same in making space for women's leadership at the local level." – *Razia Sultana, RW Welfare Society*



We thank those who participated in the virtual session with WFOs on gender and funding the COVID-19 response, in particular the speakers and organizers from the Voice of Women Organization, HER Pakistan, ASEAN Feminist Lesbian, Bisexual, and Queer Network, South Asia Disability Forum, RW Welfare Society, Karenni National Women's Organization, HomeNet South Asia, Pambansang Koalisyon Ng Kababaihan Sa Kanayunan (PKKK), OCHA, United Nations Children's Fund (UNICEF), United Nations Population Fund, International Rescue Committee (IRC), CARE, United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), OXFAM, the World Health Organization, the Gender-Based Violence Area of Responsibility for Asia and the Pacific, and Equal Asia Foundation. We thank also IASC/OCHA and UNICEF for making available the IASC Gender with Age Marker analysis.



For further information, please contact Asia-Pacific Gender in Humanitarian Action Working Group co-chairs

Maria Holtsberg, maria.holtsberg@unwomen.org

Husni Husni, husni.husni@un.org

Theophile Renard, theophile.renard@care.org

To reach the secretariat of the working group, contact

Prim Devakula, devikara.devakula@unwomen.org

