National Action Plans on Women, Peace and Security:

Critical Tools in COVID-19 Responses in the Arab States Region
© 2020 UN Women.

The views expressed in this publication are those of the author(s) and do not necessarily represent the views of UN Women, the United Nations or any of its affiliated organizations.

Report commissioned and produced by UN Women Regional Office for Arab States, as part of the project “Women, Peace and Security in the Arab States”.
This paper was authored by Aisling Swaine, Professor of Gender Studies, University College Dublin.
Research assistance: Madaline Gannon
Editor: Rachel Dore-Weeks, WPSHA Advisor, UN Women ROAS
Copy-editor: Kelly O’Neill
This report was generously funded by the Government of Finland.

Suggested citation:
EXECUTIVE SUMMARY

As the COVID-19 outbreak exacerbates the impacts of conflict and gender inequalities across Arab States, a key task for governments is to ensure that the nexus of conflict, gender inequalities and the pandemic are addressed in their responses. The UN Security Council’s Resolution 2532 (2020) acknowledges the critical roles women play in responding to the pandemic and notes its negative and gendered impacts on women and girls.\(^1\) Resolution 2242 (2015) under its Women, Peace and Security agenda (WPS) recognises that ‘the global nature of health pandemics’ is an aspect of a ‘changing global context of peace and security’ warranting increased attention as part of WPS, and thereby a critical aspect of COVID-19 responses.\(^2\) Existing National Action Plans on WPS (NAPs-WPS) are critical tools in advancing regional and national responses. In the Arab States Region – the Republic of Iraq, the Hashemite Kingdom of Jordan, the Lebanese Republic, the State of Palestine, the Republic of Tunisia and the Republic of Yemen – all have NAPs-WPS.\(^3\)

National Action Plans on Women, Peace and Security: Critical Tools in COVID-19 Responses in the Arab States Region presents a textual analysis of existing NAPs-WPS in the Arab States Region against the actions recommended by the United Nations Framework for the Immediate Socio-economic Response to COVID-19.\(^4\) The analysis indicates that while NAPs-WPS are relevant in all crises, 64 per cent of actions across the six NAPs-WPS directly correspond with recommended areas of action under the United Nations COVID-19 response framework. The analysis suggests that NAPs-WPS are neither exclusive nor distinctive from COVID-19 responses; instead, NAPs-WPS should continue to be implemented in and of themselves, as well as figure centrally in all COVID-19 planning and responses. The intersection of the COVID-19 outbreak, current and evolving peace and security issues due to the pandemic, and existing structural inequalities comprise a vital human and state security issue that requires concurrent and integrated responses. The implementation of NAPs-WPS, therefore, must be central in COVID-19 responses to ensure that national interventions address the issues exacerbated by conflict.


CONFLICT, GENDER AND COVID-19 IN THE ARAB STATES REGION

In the Arab States Region, the COVID-19 pandemic has already wrought devastating health, social and economic effects and highlighted existing gaps and weaknesses across systems in the Arab States. In tandem with existing political tensions and instability, economic retraction and grievances, and the largest refugee crisis globally, there is growing evidence that the pandemic is exacerbating conflict – or at least its effects – and disrupting efforts towards peace in the region. At minimum, and despite the UN Secretary-General’s call for a global ceasefire, armed violence continues unabated in locations such as Iraq, Syria, Yemen and Libya. Moreover, there is evidence that state and non-state actors are exploiting the disruption caused by the pandemic. For example, Iraq’s current “unprecedented economic downturn” as a result of COVID-19 is weakening the state’s ability to respond to efforts by the Islamic State of Iraq and the Levant (ISIL) to exploit lockdown measures and advance its resurgence.

The pandemic further deepens vulnerabilities among conflict-affected populations who are already struggling under weakened health and social services. The closure of borders is inhibiting movement towards safer places and reducing asylum seeking in the region. Harsh living conditions and gaps in humanitarian services render displacement camps and surrounding communities potential sites of both the spread of the virus, and of tension, within and between these populations. In several countries in the region, mistrust, politicized and racial discrimination and blaming the spread of the virus on refugees, migrants and personnel in international organizations all combine to amplify intercommunity tensions.

In addition to these significant challenges, macro-level diplomatic efforts aimed at fostering peace in the region are being hampered, with UN special envoys unable to access the region due to travel restrictions. Multilateral engagement in regional peace initiatives, such as in Yemen, are falling down the list of priorities as lead countries deal with their own domestic fallout due to the pandemic.

A prominent feature of COVID-19 is the exacerbation of gender inequalities. While the pandemic has resulted in an estimated unemployment rate of 1.7 million across the region.

In addition, pressures on health systems and services restrict access to vital reproductive, contraceptive and menstrual care for women and girls. In Tunisia, the difference between the high number of women working in the health sector and their low representation in managerial roles has become an important issue to address to ensure their place in all decision-making related to pandemic response.

There are also positive aspects that can be harnessed to help shift the region towards peace. Notably, the pandemic is fostering social cohesion at local levels in the Kurdistan Region of Iraq where there is a growing appreciation of the importance of multilateral cooperation in resolving the crisis. Peacebuilding initiatives at the micro level are increasingly critical to communities.

Women’s organizations in the region have adapted to the pandemic and have “worked with people in different parts of [their] countries to spread knowledge about preventive measures and help ... inadequate health facilities to provide services”.

Across the region, reports of domestic violence have increased as has the purported severity of the physical violence involved. In Lebanon, Palestine and Tunisia, the closure of courts, legal services and pandemic-related confinement all negatively impact women who have fled from domestic violence and require urgent court-ordered safety mechanisms, including child support and custody arrangements.

In addition, pressures on health systems and services restrict access to vital reproductive, contraceptive and menstrual care for women and girls. In Tunisia, the difference between the high number of women working in the health sector and their low representation in managerial roles has become an important issue to address to ensure their place in all decision-making related to pandemic response.

There are also positive aspects that can be harnessed to help shift the region towards peace. Notably, the pandemic is fostering social cohesion at local levels in the Kurdistan Region of Iraq where there is a growing appreciation of the importance of multilateral cooperation in resolving the crisis. Peacebuilding initiatives at the micro level are increasingly critical to communities.

Women’s organizations in the region have adapted to the pandemic and have “worked with people in different parts of [their] countries to spread knowledge about preventive measures and help ... inadequate health facilities to provide services”.

Across the region, reports of domestic violence have increased as has the purported severity of the physical violence involved. In Lebanon, Palestine and Tunisia, the closure of courts, legal services and pandemic-related confinement all negatively impact women who have fled from domestic violence and require urgent court-ordered safety mechanisms, including child support and custody arrangements.


In some cases, online and digital methods are facilitating ongoing peace negotiations and arguably, these technological adaptations could provide new opportunities for the participation of women’s civil society. For instance, the new Libyan Women’s Network for Peacebuilding connects 36 women using mobile phones across political and geographic divides to discuss and strategize around making peace. By using Zoom and WhatsApp platforms, the women meet online to collaborate around calling for a ceasefire, advocating for the release of imprisoned activists and raising awareness of the pandemic through social media channels.

Given the complexities above, a critical element in any regional response to the pandemic is a comprehensive plan that addresses the nexus of gender, conflict and the pandemic. A central focus should be investment in political and social dialogue and ensuring that practical and political responses to COVID-19 support, rather than undermine, peacebuilding and the fostering of community trust. With the aspiration of states such as Jordan to be “driver[s] of peace and security in the region” and Tunisia playing a key role in the Security Council’s adoption of Resolution 2532 (2020), national action plans on women, peace and security (NAPs-WPS) are critical roadmaps to guide COVID-19 responses that can address the gendered health, social and economic impacts of the pandemic while also sustaining progress towards peace in the region.

ANALYSIS: ARE NATIONAL ACTION PLANS ON WOMEN, PEACE AND SECURITY RELEVANT TO GLOBAL AND NATIONAL COVID-19 RESPONSES?

An analysis of the existing NAPs-WPS of Iraq, Jordan, Lebanon, Palestine, Tunisia and Yemen was undertaken to assess and demonstrate the direct relevance of the plans to each country’s COVID-19 response. For the purposes of this research, the paper includes the first Iraq NAP-WPS (2014–2018). While the plan has expired, it remains the only approved NAP-WPS for Iraq until the new plan receives government approval – an outcome which is expected imminently. While NAPs-WPS are relevant in every crisis, the analysis highlights particular areas of overlap with specific global responses to COVID-19, thus providing critical evidence of the value of implementing nation action plans on women, peace and security in the current crisis.

FRAMEWORK OF ANALYSIS

Ideally, NAPs-WPS would be assessed against each country’s national COVID-19 response plans. Formal national planning in each country, however, is currently unavailable. Instead, the paper uses the United Nations Framework for the Immediate Socio-economic Response to COVID-19 (hereafter referred to as the UN COVID-19 Framework) to assess NAPs-WPS. While primarily oriented towards the UN system and its role in support of governments, the UN COVID-19 Framework establishes a comprehensive multisectoral approach to bring together competent global, regional and national responses to the pandemic. The framework clearly identifies the need for “gendered approaches to build back better” in pandemic recovery and its implementation would reinforce ongoing execution of UN normative frameworks on gender equality such as the WPS agenda (see Box 1 for an overview of relevant international frameworks).

BOX 1

- UN normative frameworks for a gendered response to COVID-19

  - The United Nations has called for pandemic responses that address the intersection of gender, conflict and COVID-19. The following set of international frameworks establishes a basis for such an approach.

  - UN Security Council Resolution 2177 (on the Ebola Infectious Disease Ontology in West Africa, 2014) states that “responses to the Ebola outbreak should address the specific needs of women and ... the importance of their full and effective engagement in the development of such responses”.

  - UN Security Council Resolution 2532 (2020) “calls for concrete actions to ... ensure the full, equal and meaningful participation of women and youth in the development and implementation of an adequate and sustainable response to the pandemic”.

  - UN Security Council Resolution 2242 (2015), under the WPS agenda, establishes the importance of WPS-led responses to health pandemics. It also calls on “[m]ember States to further integrate the women, peace and security agenda into their strategic plans such as national actions plans and other planning frameworks, with sufficient resources, including implementation of relevant obligations under international humanitarian law and international human rights law”.

The CEDAW Committee’s Guidance Note on CEDAW and COVID-19 aims to ensure that “measures taken to address the COVID-19 pandemic do not directly or indirectly discriminate against women and girls”. It advises States to “continue implementing the women, peace and security agenda”, including gender-conflict analysis, as part of responses in humanitarian and conflict-affected settings.

The UN COVID-19 Framework consists of the following five pillars that provide a means to enact immediate and longer-term responses to the pandemic.

1. **HEALTH** Ensure health systems are equipped to respond to COVID-19, maintain non-essential health services and get information to affected populations.

2. **PROTECTING PEOPLE (hereafter referred to as ‘social protection’)** Maintain social protection services and scale up where needed, including in humanitarian action and response to gender-based violence (GBV).

3. **ECONOMIC RESPONSE AND RECOVERY** Assess and respond to the gendered and socioeconomic impacts of the pandemic, adopt digital-based economic solutions where feasible, and support employment and businesses, and women entrepreneurs in particular.

4. **MACROECONOMIC RESPONSE AND MULTILATERAL COLLABORATION** Generate evidence of, and respond to, the macroeconomic effects of the pandemic, including prioritizing social development and working on a collaborative basis globally.

5. **SOCIAL COHESION AND COMMUNITY RESILIENCE** Promote social dialogue, community empowerment and participation and uphold basic rule of law practice.

Table 1 presents an overview of the five pillars and their actionable sub-components as found in the official framework document. For further information, see “The Response: What the UNDS will do” for each pillar.

---

<table>
<thead>
<tr>
<th>PILLAR</th>
<th>SPECIFIC DESIGNATED AREAS OF ACTION</th>
</tr>
</thead>
</table>
| HEALTH: Protecting health services and systems during the crisis | • Providing analytical and policy support, and rapid technical guidance to aid partners in their responses.  
• Programme implementation and technical support (for technical response to COVID-19).  
• Support in tracking and reaching vulnerable populations.                                                                                                                                                                                                                                                                                                             |
| PROTECTING PEOPLE: Social protection and basic services   | • Scale up and expand resilient and pro-poor social protection systems.  
• Maintain essential food and nutrition services.  
• Ensure continuity and quality of water and sanitation services.  
• Secure sustained learning for all children and adolescents, preferably in schools  
• Support the continuity of social services and access to shelters.  
• Support victims of gender-based violence (GBV).                                                                                                                                                                                                                                                                                                                 |
| ECONOMIC RESPONSE AND RECOVERY: Protecting jobs, small and medium-sized enterprises, and vulnerable workers in the informal economy | • Integrated, country-specific policy advice and programme support.  
• Scaling-up employment intensive programming.  
• Support to young people and social partners in entrepreneurship and social innovation in response to COVID-19.  
• Support on strategies to green fiscal stimulus packages.  
• Rapid and gender-responsive socioeconomic assessments and labour market and business environment diagnostics.  
• Advice on nature-based solutions for development, including for SMEs.  
• Business linkages support.  
• Investments to improve productivity and working conditions in micro and small firms.  
• Technical support to women micro and small entrepreneurs.  
• Digital payments support.  
• Assistance to address trade challenges and facilitating trade flows.  
• E-commerce and digital solutions to allow secure access to services needed at the time of crisis, particularly by vulnerable groups.                                                                                                                                                                                                                     |
MACROECONOMIC RESPONSE AND MULTILATERAL COLLABORATION

- Analytical, advisory and technical assistance services.
- Stepped-up technical support to Member States to improve the evidence base for policymaking, including in emergency response.
- Advice on social expenditure monitoring and mapping of budgets for social development priorities to assist governments in rebalancing public expenditures.
- Conduct of comprehensive impact assessments at the household level, and to undertake context-specific socio-economic impact analysis of the crisis.

SOCIAL COHESION AND COMMUNITY RESILIENCE

- Inclusive social dialogue, advocacy, and political engagement.
- Empower community resilience, participation, and equitable service delivery.
- Support to governance, fundamental freedoms and the rule of law.

NATIONAL ACTION PLANS ON WOMEN, PEACE AND SECURITY

In the Arab States Region, the national action plans of Iraq, Jordan, Lebanon, Palestine, Tunisia and Yemen form a clear basis from which to launch gender-responsive approaches to peace and security and highlight their relevance to the COVID-19 outbreak. The League of Arab States’ Regional Strategy and Executive Action Plan 2015–2030, Protection of Arab Women: Peace and Security, already acknowledges the changing nature of threats to the state and that these now include “epidemics such as HIV/AIDS”. Furthermore, the strategy recognizes that the containment of the HIV virus became a key aspect of human security requiring multilateral cooperative and collaborative responses. Certainly, the nexus of the current COVID-19 viral outbreak, existing and evolving peace and security issues as a result of the pandemic, and structural inequalities constitute a considerable human and state security issue. This understanding of the linkages is vital to the COVID-19 response. Certainly, the NAPs-WPS of each of these six countries constitute key tools to enable a gender-sensitive approach in all areas of pandemic response. Box 2 provides an overview of each country’s plan.

33. League of Arab States, 2012. See p. 66 for example.
BOX 2

THE REPUBLIC OF IRAQ (2014-2018): The NAP, adopted by the Federal Government of Iraq and Kurdistan Regional Government, complements existing strategies for the advancement of women. The NAP is structured around six pillars: (1) Participation; (2) Protection and Prevention; (3) Promotion; (4) Social and Economic Empowerment; (5) Legislation and Law Enforcement; and (6) Resource Mobilization. A ‘Task Force NAP1325’ of executive, legislative and civil society representatives oversees implementation and a body like this would be ideal for developing a cross-sectoral approach to using the NAP in response to COVID-19. A revised second NAP-WPS (2020-2024) has been drafted and submitted to the Iraqi Secretary General’s office for endorsement at the beginning of 2020. However, the process was delayed due to COVID-19 and the first NAP-WPS has been used in this paper as a result.

THE HASHEMITE KINGDOM OF JORDAN (2018–2021) The Jordanian National Commission for Women led a national coalition to develop the NAP. The plan is organized towards the achievement of four goals: (1) achieve gender-responsiveness and meaningful participation of women in the security sector and in peace operations; (2) achieve the meaningful participation of women in preventing radicalization and violent extremism, as well as in national and regional peacebuilding; (3) ensure the availability of gender-sensitive humanitarian services (including psychological, social, legal and medical services); and (4) foster a community culture that recognizes gender needs, the importance of gender equality and the role of women (including young women) in peace and security.

THE LEBANESE REPUBLIC (2019–2022) The National Commission for Lebanese Women led the drafting of the Lebanese NAP-WPS across a range of government ministries. The Lebanon NAP-WPS has five priority areas: (1) participation in decision-making at all levels; (2) prevention of conflict; (3) prevention of – and protection of women and girls from – gender-based violence; (4) relief and recovery; and (5) normative frameworks.

THE STATE OF PALESTINE (2017–2019) The Palestine NAP-WPS was led by the Ministry of Women’s Affairs and is organized around three strategic objectives: (1) enhance the protection of Palestinian women and girls, especially from the violations of the Israeli occupation; (2) hold the Israeli occupation accountable; and (3) enhance the participation of Palestinian women in local and international decision-making processes.
REPUBLIC OF TUNISIA (2018–2020) The plan was developed by a joint steering committee led by the Ministry of Women, Family and Children and made up of government entities and civil society. A technical committee was also attached to each pillar of the plan. The plan has five components or: (1) prevention; (2) protection; (3) participation; (4) relief, peacebuilding and reconstruction; and (5) information and advocacy.

THE REPUBLIC OF YEMEN (2020–2023) The development of the NAP-WPS was led by a technical team comprised of the Ministry of Social Affairs and Labour, the Yemeni Women’s Union and the National Women’s Committee. The plan is built around four goals: (1) strengthen women’s participation at all levels of decision-making; (2) guarantee the prevention of conflict and all forms of sexual violence, extremism and terrorism; (3) strengthen women’s protection from all forms of violence; and (4) provide humanitarian needs for women during and after conflict in a gender-responsive manner.

METHOD OF ANALYSIS: NAPS-WPS AND THE UN COVID-19 FRAMEWORK

The first step in the research process was to identify whether and how the WPS agenda is relevant to and intersects with COVID-19 generally, and with the UN COVID-19 Framework specifically. Table 2 presents a representation of where and how select provisions of the WPS resolutions intersect with the five pillars of that framework.
Table 2
Thematic areas of synergy between UN COVID-19 Framework and the WPS resolutions

<table>
<thead>
<tr>
<th>UN COVID-19 FRAMEWORK</th>
<th>WPS RESOLUTIONS SELECTED) CORRESPONDING PROVISIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEALTH FIRST: protecting health services and systems during the crisis</td>
<td>Resolution 1888 (2009), OP 13: Encourages States, with the support of the international community, to increase access to health care, psychosocial support, legal assistance and socio-economic reintegration services for victims of sexual violence, in particular in rural areas</td>
</tr>
<tr>
<td>Example actions: maintain essential health services tracking and reaching vulnerable populations</td>
<td>Resolution 2106 (2013), OP 20. Notes the link between sexual violence in armed conflict and post-conflict situations and HIV infection, and the disproportionate burden of HIV and AIDS on women and girls as a persistent obstacle and challenge to gender equality; and urges United Nations entities, Member States and donors to support the development and strengthening of capacities of national health systems and civil society networks in order to provide sustainable assistance to women and girls living with or affected by HIV and AIDS in armed conflict and post-conflict situations</td>
</tr>
<tr>
<td>Resolution 2122 (2013), preambular section: Recognizing the importance of Member States and United Nations entities seeking to ensure humanitarian aid and funding includes provision for the full range of medical, legal, psychosocial and livelihood services to women affected by armed conflict and post-conflict situations, and noting the need for access to the full range of sexual and reproductive health services, including regarding pregnancies resulting from rape, without discrimination,</td>
<td></td>
</tr>
<tr>
<td>Resolution 2422 (2015), preambular section: Noting the changing global context of peace and security, in particular relating to rising violent extremism, which can be conducive to terrorism, the increased numbers of refugees and internally displaced persons, the impacts of climate change and the global nature of health pandemics, and in this regard reiterating its intention to increase attention to women, peace and security as a cross-cutting subject in all relevant thematic areas of work on its agenda, including threats to international peace and security caused by terrorist acts,</td>
<td></td>
</tr>
</tbody>
</table>
### PROTECTING PEOPLE: social protection and basic services

**Example actions:**
- Maintain essential services
- Sustained learning for all children, and adolescents, preferably in schools
- Continuity of social services and access to shelters
- Support victims of Gender-Based Violence (GBV)

<table>
<thead>
<tr>
<th>Resolution</th>
<th>OP</th>
<th>Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1325 (2000), OP 12:</strong></td>
<td>Calls upon all parties to armed conflict to respect the civilian and humanitarian character of refugee camps and settlements, and to take into account the particular needs of women and girls, including in their design, and recalls its resolutions 1208 (1998) of 19 November 1998 and 1296 (2000) of 19 April 2000;</td>
<td></td>
</tr>
<tr>
<td><strong>1889 (2009), OP 11:</strong></td>
<td>Urges Member States, United Nations bodies and civil society, including non-governmental organizations, to take all feasible measures to ensure women and girls’ equal access to education in post-conflict situations, given the vital role of education in the promotion of women’s participation in post-conflict decision making;</td>
<td></td>
</tr>
<tr>
<td><strong>1820 (2008), OP 13:</strong></td>
<td>Urges all parties concerned, including Member States, United Nations entities and financial institutions, to support the development and strengthening of the capacities of national institutions, in particular of judicial and health systems, and of local civil society networks in order to provide sustainable assistance to victims of sexual violence in armed conflict and post-conflict situations;</td>
<td></td>
</tr>
<tr>
<td><strong>1960 (2010), OP 16:</strong></td>
<td>Requests the Secretary-General to continue and strengthen efforts to implement the policy of zero tolerance on sexual exploitation and abuse by United Nations peacekeeping and humanitarian personnel</td>
<td></td>
</tr>
<tr>
<td><strong>2106 (2013), OP 19:</strong></td>
<td>Recognizing the importance of providing timely assistance to survivors of sexual violence, urges United Nations entities and donors to provide non-discriminatory and comprehensive health services, including sexual and reproductive health, psychosocial, legal, and livelihood support and other multi-sectoral services for survivors of sexual violence, taking into account the specific needs of persons with disabilities; calls for support to national institutions and local civil society networks in increasing resources and strengthening capacities to provide the abovementioned services to survivors of sexual violence;</td>
<td></td>
</tr>
<tr>
<td><strong>2122 (2013), preambular section:</strong></td>
<td>Recognizing the importance of Member States and United Nations entities seeking to ensure humanitarian aid and funding includes provision for the full range of medical, legal, psychosocial and livelihood services to women affected by armed conflict and post-conflict situations, and noting the need for access to the full range of sexual and reproductive health services, including regarding pregnancies resulting from rape, without discrimination</td>
<td></td>
</tr>
</tbody>
</table>
Resolution 2242 (2015), preambular section: Recognizing the significance of the fifteen-year anniversary of resolution 1325 (2000), the progress made as well as the opportunity and need for far greater implementation of the women, peace and security agenda, remaining deeply concerned by the frequent under-representation of women in many formal processes and bodies related to the maintenance of international peace and security, the relatively low number of women in senior positions in political, peace and security - related national, regional and international institutions, the lack of adequate gender sensitive humanitarian responses and support for women’s leadership roles in these settings, insufficient financing for women’s leadership roles in these settings, and the resulting detrimental impact on the maintenance of international peace and security,

Resolution 2467 (2019), preambular section: Recognizing that sexual violence in conflict occurs on a continuum of interrelated and recurring forms of violence against women and girls, and recognizing that conflict also exacerbates the frequency and brutality of other forms of gender-based violence,

ECONOMIC RECOVERY: Protecting jobs, small and medium-sized enterprises, and vulnerable workers in the informal economy

Example actions:
- scaling-up employment intensive programming support to young people and social partners in entrepreneurship and social innovation
- rapid and gender-responsive socioeconomic assessments and labour market and business diagnostics
- technical support to women micro and small entrepreneurs

Resolution 1889 (2009), preambular section: Recognizing the particular needs of women and girls in post-conflict situations, including, inter alia, physical security, health services including reproductive and mental health, ways to ensure their livelihoods, land and property rights, employment, as well as their participation in decision-making and post-conflict planning, particularly at early stages of post-conflict peacebuilding,
Resolution 1889 (2009), OP 10. Encourages Member States in post-conflict situations, in consultation with civil society, including women’s organizations, to specify in detail women and girls’ needs and priorities and design concrete strategies, in accordance with their legal systems, to address those needs and priorities, which cover inter alia support for greater physical security and better socio-economic conditions, through education, income generating activities, access to basic services, in particular health services, including sexual and reproductive health and reproductive rights and mental health, gender-responsive law enforcement and access to justice, as well as enhancing capacity to engage in public decision-making at all levels;

Resolution 2122 (2013), preambular section: Recognizing that the economic empowerment of women greatly contributes to the stabilization of societies emerging from armed conflict, and welcoming the Peacebuilding Commission’s declaration on women’s economic empowerment for peacebuilding of 26 September 2013 (PBC/7/OC/L.1),

Resolution 1888 (2009) OP 13: Encourages States, with the support of the international community, to increase access to health care, psychosocial support, legal assistance and socio economic reintegration services for victims of sexual violence, in particular in rural areas;

Resolution 2467 (2019), Emphasizing that advancing gender equality and women’s political, social, and economic empowerment is critical to the prevention of and response to sexual violence in conflict and post-conflict situations, and that the safety and empowerment of women and girls is important for their meaningful participation in peace processes, preventing conflicts and rebuilding societies, and that therefore women’s protection and participation are inextricably linked and mutually-reinforcing as reflected by all previous resolutions on women, peace and security,

Resolution 2493 (2019), OP 5: Calls on Member States to promote all the rights of women, including civil, political and economic rights, urges them to increase their funding on women, peace and security including through more aid in conflict and post-conflict situations for programmes that further gender equality and women’s economic empowerment and security, as well as through support to civil society, and to support countries in armed conflict and post-conflict situations, including through access to education, training and capacity-building, in their implementation of women, peace and security resolutions, further calls for increased international development cooperation related to women’s empowerment and gender equality and invites aid providers to continue to track the gender focus of aid contributions and provide further information and assessment on this progress;
Resolution 1889 (2009), preambular section: Noting that despite progress, obstacles to strengthening women’s participation in conflict prevention, conflict resolution and peacebuilding remain, expressing concern that women’s capacity to engage in public decision making and economic recovery often does not receive adequate recognition or financing in post-conflict situations, and underlining that funding for women’s early recovery needs is vital to increase women’s empowerment, which can contribute to effective post-conflict peacebuilding.

Resolution 1889 (2009), OP 1: Urges Member States, international and regional organisations to take further measures to improve women’s participation during all stages of peace processes, particularly in conflict resolution, post-conflict planning and peacebuilding, including by enhancing their engagement in political and economic decision-making at early stages of recovery processes, through inter alia promoting women’s leadership and capacity to engage in aid management and planning, supporting women’s organizations, and countering negative societal attitudes about women’s capacity to participate equally;

Resolution 1889 (2009), OP 8: Urges Member States to ensure gender mainstreaming in all post-conflict peacebuilding and recovery processes and sectors;

Resolution 1889 (2009), OP 9: Urges Member States, United Nations bodies, donors and civil society to ensure that women’s empowerment is taken into account during post-conflict needs assessments and planning, and factored into subsequent funding disbursements and programme activities, including through developing transparent analysis and tracking of funds allocated for addressing women’s needs in the post-conflict phase;

Resolution 2122 (2013), OP 11: Urges all parties concerned, including Member States, United Nations entities and financial institutions, to support the development and strengthening of the capacities of national institutions, in particular of judicial and health systems, and of local civil society networks in order to provide sustainable assistance to women and girls affected by armed conflict and post-conflict situations;
### SOCIAL COHESION AND
COMMUNITY RESILIENCE

Example actions:
inclusive social dialogue, advocacy, and political engagement
empower community resilience, participation, and equitable service delivery
support to governance, fundamental freedoms and the rule of law

<table>
<thead>
<tr>
<th>Resolution (2000), OP 2:</th>
<th>Encourages the Secretary-General to implement his strategic plan of action (A/49/587) calling for an increase in the participation of women at decision-making levels in conflict resolution and peace processes;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resolution 1889 (2009), p.4:</td>
<td>Remaining deeply concerned about the persistent obstacles to women’s full involvement in the prevention and resolution of conflicts and participation in post-conflict public life, as a result of violence and intimidation, lack of security and lack of rule of law, cultural discrimination and stigmatization, including the rise of extremist or fanatical views on women, and socio-economic factors including the lack of access to education, and in this respect, recognizing that the marginalization of women can delay or undermine the achievement of durable peace, security and reconciliation,</td>
</tr>
<tr>
<td>Resolution 2106 (2013), OP 11:</td>
<td>Emphasizes the important role that can be played by women, civil society, including women’s organizations, and formal and informal community leaders in exerting influence over parties to armed conflict with respect to addressing sexual violence;</td>
</tr>
<tr>
<td>Resolution 2493, OP 3:</td>
<td>Urges Member States supporting peace processes to facilitate women’s full, equal and meaningful inclusion and participation in peace talks from the outset, both in negotiating parties’ delegations and in the mechanisms set up to implement and monitor agreements, encourages Member States to support efforts, including timely support to women to enhance their participation and capacity building in peace processes, in order to address the unequal representation and participation of women in the peace and security agenda,</td>
</tr>
<tr>
<td>Resolution 2493 (2019), OP 6:</td>
<td>Strongly encourages Member States to create safe and enabling environments for civil society, including formal and informal community women leaders, women peacebuilders, political actors, and those who protect and promote human rights, to carry out their work independently and without undue interference, including in situations of armed conflict, and to address threats, harassment, violence and hate speech against them;</td>
</tr>
</tbody>
</table>

The second step in the research process was to evidence the relevance of the UN COVID-19 Framework to gendered response to the pandemic across the region. Table 3 sets out emerging evidence of the conflict and gender-related impacts of the pandemic across the Arab States against the UN COVID-19 Framework.
Table 3
Intersection of UN COVID-19 Framework and conflict and gender-related impacts of the pandemic in Arab States

<table>
<thead>
<tr>
<th>UN COVID-19 FRAMEWORK PILLAR</th>
<th>CONFLICT AND GENDERED IMPACTS OF THE COVID-19 PANDEMIC IN ARAB STATES REGION</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEALTH: Protecting health services and systems during the crisis</td>
<td>In Lebanon, Jordan and Yemen, high numbers of people living in densely populated sites make social distancing and frequent handwashing very difficult. Conflict has taken its toll on existing health services. In Palestine, the military occupation and restrictions on mobility have inhibited importation of medical supplies through Israeli ports and led to detrimental impacts on women needing to cross checkpoints for obstetric care. In Yemen, access to basic health information and services was already lacking pre-pandemic with only 20% of services providing maternal care; as well, the country’s existing high levels of maternal mortality may be exacerbated as a result of the pandemic. In Tunisia, existing differences between high numbers of women working in the health sector and their low representation in managerial roles, limit formal women’s leadership positions in response to the pandemic. In Lebanon, only 18% of the Inter-Ministerial Committee on COVID-19 are women, while the intersection of the economic crisis with the pandemic significantly impacts the large numbers of female health workers now dealing with reduced or no wages, quarantining without pay and increased and risky workloads.</td>
</tr>
</tbody>
</table>
In Yemen, the dearth of services and lack of humanitarian response has meant critical risks of exposure to, and detrimental impact from, COVID-19 for an estimated 24 million displaced persons and refugees.5

In Iraq, children’s education has ceased, and efforts are needed to avoid deepening existing inequalities between girls and boys in a context where just 20% of girls reach third-level education.6 In Palestine, the closure of schools has resulted in a higher burden of care for women.7

Across the region, reporting of domestic violence has surged, as has the purported severity of the physical violence involved.8 In Iraq, due to high reporting, there have been increased calls for the adoption of a stalled domestic violence law.9 In Lebanon, Palestine, Tunisia and Yemen, the closure of courts, legal services, refugee services, and increased confinement as a result of COVID-19, all negatively impact women who are in, or have fled from, situations of domestic violence and require urgent court-ordered safety mechanisms, including child support and custody arrangements.10

The need to address the risk of infection for women in detention, particularly those with children, receives neither adequate nor gendered responses.11 In Tunisia, detention and holding centres for migrants and asylum seekers lack the sanitation and facilities required to safely respond to the virus.12

For migrant workers, the closure of borders has prevented repatriation, with suicides among women who were contained as they waited to be repatriated.13 Live-in workers, facing potentially harmful duties through demands for extensive cleaning, are at risk of increased violence and abuse, and may be unable to access services or help if they contract the virus.14

In Jordan, of those employed in the informal sector prior to the pandemic-induced crisis, 99% had lost their jobs by April 2020 and 84% had used their savings to fulfil basic needs resulting in detrimental effects on women’s economic independence.15

In Palestine, 95% of women’s small and medium enterprises have experienced negative impacts from the pandemic and 27% have shut down.16

In Jordan, women’s informal economy work, such as the production and selling of food, has been neglected in economic and social protection packages.17
The pandemic has resulted in an estimated unemployment rate of 1.7 million across the Arab region.18

Estimates suggest that economic contraction in the region will result in a 14–19% reduction in women’s employment in Lebanon.19 In Yemen, where the workforce participation of women was one of the lowest in the world pre-conflict and pre-pandemic, macro-level policymaking plays a critical role in supporting national efforts specifically aimed at women’s labour rights.20

Women’s organizations in the region have backed the UN Secretary-General’s call for a global ceasefire and called on parties to conflicts in the region to enable full medical care and humanitarian access. In Yemen, advocacy for a ceasefire presents some opportunities; however, women’s participation in online forums is further hampered by restrictive access to technologies.21

Women’s organizations have worked tirelessly to take on new roles and have adapted to the Ebola Infectious Disease Ontology. They have also “worked with people in different parts of [their] countries to spread knowledge about preventive measures and help our inadequate health facilities to provide services”.22

It is imperative to resolve political tensions and maintain peace negotiations, which are in some instances being facilitated by online and digital methods. It is likewise critical to provide ongoing as well as new opportunities and means for the participation of women and women’s civil society organizations.23

The third step in the research process was the analysis of the six NAPs-WPS against the UN COVID-19 Framework.

On the assumption that the UN COVID-19 Framework provides a solid overarching scaffolding design for thematic areas of action in global and national responses to the pandemic, the analysis focused on assessing synergies between the six NAPs-WPS and the five pillars of that framework. Each NAP-WPS was thereby assessed in respect to whether and how its actions overlap or directly correspond with the five pillars of the UN COVID-19 Framework.

The following questions guided the textual analysis of each of the NAPs-WPS against the UN COVID-19 Framework:

- Are NAPs-WPS specifically relevant to the UN COVID-19 Framework? Do areas of action in the action plans correspond with areas of action in the UN COVID-19 Framework?
- Are there specific noteworthy areas of synergy between the actions outlined in the NAPs-WPS of Iraq, Jordan, Lebanon, Palestine, Tunisia and Yemen and the action areas under each of the five pillars of the UN COVID-19 response framework?
The following questions guided a deeper comparative analysis of NAPs-WPS and the UN COVID-19 Framework. In what ways can the actions in NAPs-WPS be interpreted to specifically correspond with the response framework? How are NAPs-WPS relevant to national responses to the pandemic?

To undertake the textual analysis, the action matrices of each of the six action plans of Iraq, Jordan, Lebanon, Palestine, Tunisia and Yemen were extracted and entered into Excel software. The five pillars of the UN COVID-19 Framework and the action areas under each pillar (as set out in Table 1) were also imported and set against each of the NAPs-WPs action matrices.

To assess whether each action corresponded in any way with those in the UN COVID-19 planning framework, the third stage of research involved a textual analysis of the ‘activities’ pillar of each NAPs-WPS. A value of ‘one’ was given to each area of overlap. See Table 4 for an example of that analysis where Pillar 2 of the Iraq NAPs-WPS is assessed against Pillar 2 of the UN COVID-19 Framework.

**Table 3**

**Example of analysis of Iraq NAP-WPS Pillar 2 and the UN COVID-19 Framework Pillar 2**

<table>
<thead>
<tr>
<th>IRAQ NAP-WPS</th>
<th>UN COVID-19 FRAMEWORK</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PILLAR 2: PROTECTION AND PREVENTION</strong></td>
<td><strong>PILLAR 2</strong></td>
</tr>
<tr>
<td><strong>PROTECTING PEOPLE: Social Protection and Basic Services</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Strategic Objective</th>
<th>Specific Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scale up and expand resilient and pro-poor social protection systems</td>
<td>Maintain essential food and nutrition services</td>
</tr>
<tr>
<td>Ensure continuity and quality of water and sanitation services</td>
<td>Secure sustained learning for all children and adolescents, preferably in schools</td>
</tr>
<tr>
<td>Support the continuity of social services and access to shelters</td>
<td>Support victims of gender-based violence (GBV).</td>
</tr>
<tr>
<td>Protection .2 of women from GBV and providing the victims and survivors of violence the means for their rehabilitation and reintegration into the society during and after the post-conflict transitional period</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Identifying .1 the actual women affected by the conflicts including widows and victims of trafficking and prostitution</td>
<td></td>
</tr>
<tr>
<td>Establishing .2 separate cells for women’s cases and providing free legal services</td>
<td></td>
</tr>
<tr>
<td>Establishing .3 shelters and safe spaces for psychosocial support and free legal services for women victims of violence in accordance with international standards</td>
<td></td>
</tr>
<tr>
<td>Developing .4 trainings and programmes on GBV and UNSCR 1325 for women’s NGOs and professionals (judges, doctors, social workers) who work directly with victims</td>
<td></td>
</tr>
</tbody>
</table>

A set of ‘rules’ was established to guide the textual analysis and ensure that the subjective assessment of the plans on the part of the researcher was at least consistent across all six plans. Limited to the NAPs-WPS planning documents, the analysis focuses on the planning frameworks and synergies across the action planning set out in both documents; it does not encompass actions related to implementation.

34 Arguably, all aspects of the WPS agenda are relevant to COVID-19 response, particularly in ensuring women’s decision-making roles across all government institutions. While the NAP contains several pillars, the research focused on the ones relevant to COVID-19. For example, all actions on GBV were included, while actions on countering violent extremism were not.
RESEARCH FINDINGS: NAPS-WPS AND THE UN COVID-19 FRAMEWORK

The findings indicate that out of the total number of actions across all six action plans, 64 per cent could be identified as directly in line with the actions listed under the pillars of the UN COVID-19 Framework (see Figure 1).

As Figure 2 indicates, there is a degree of variance across the plans regarding actions that correspond to the UN COVID-19 Framework in all six action plans. For example, 89 per cent of the Yemen and 79 per cent and 77 per cent of the Iraq and Tunisia plans, respectively, fall in line with the pillars of the framework versus just 33 per cent in Jordan.

There is further variance across the plans in how they correspond with each of the five pillars of the UN COVID-19 Framework (see Figure 3). While most of the actions that fall in line with the framework’s pillars fall under social protection, Tunisia and Yemen contain the most actions on social protection at 55 per cent and 50 per cent respectively, while Palestine has the least at 23 per cent. The second highest area of congruence between the NAPs-WPS and the UN COVID-19 Framework is under the social cohesion pillar, with Yemen and Palestine – both states affected by ongoing political contestation within their territories – having the highest percentage of actions in this area (see Figure 3).
Overall, there is little overlap between the pillars on health and economic recovery and the macroeconomic pillar of the UN COVID-19 Framework with the actions listed in the six NAPs-WPS (see figure 3).

This is a critical gap in terms of assessing the relevance of NAPs-WPS to women’s health needs generally in response to humanitarian crisis, peacebuilding and conflict and further, the relevance of NAPs-WPS when it comes to emerging crises, that are not armed conflict, such as the current global pandemic.

Issues such as reproductive health and rights, critical at all times, should be integral to WPS implementation. The second draft of the Iraq NAP-WPS contains an action on abortion services which is a critical advancement (see Box 3) since it is vital to maintain the supply of reproductive care, abortion and contraceptive services during the pandemic. Similarly, the analysis indicates a gap in addressing the economic and livelihoods needs of women and girls in conflict and peacebuilding through NAPs-WPS (see Figure 4 and Figure 5).

**BOX 3**

Draft second Iraq NAP-WPS (2020–2024)

As noted, the forthcoming draft second Iraq NAP-WPS remains to be endorsed by the Iraqi government. However, the draft plan contributes additional dimensions in responding to the COVID pandemic to those in the first NAP-WPS (which was the subject of analysis for this paper) and are mentioned here:

The draft second Iraq NAP-WPS houses actions linked to all five pillars of the UN COVID-19 Framework (Health, Social Protection, Economic recovery, Macroeconomic Response and Social Cohesion). Notable are a set of actions setting out the provision of multisectoral services in response to GBV, notably often overlooked mental health services, and the establishment of safe spaces and provision of shelters, all of which would fulfil aspects of the Social Protection pillar. It also houses clear aims to include concepts of ‘peace and peaceful coexistence’ in educational curriculum, an imperative in itself, but also evidencing the links that can be made in addressing the Social Protection and Social Cohesion

---

pills of the UN COVID-19 Framework. One of the three pillars of the draft second plan focuses on women’s participation with actions to enhance women’s role in peace committees and in initiatives towards conflict prevention and resolution. Participation of women in ‘relief and reconstruction at the national and local levels’ would also fall in line with the UN COVID-19 pillars on Social Cohesion, Social Protection and Economic Recovery and the overall goal of international efforts to ‘build back better’ following the impact of the pandemic. Among the actions related to Social Cohesion in the draft second Iraq plan, are a set of actions on Early Warning (which is also evident in the Yemen NAP). This includes a full output area and related actions focused on gender in early warning frameworks that include training on gender and early warning and ensuring women’s participation in early warning systems, particularly at the community level. It is essential that implementation of WPS during and post the pandemic address the enduring potential causes of conflict as well as those that have become exacerbated by or newly triggered by the pandemic (under the Social Cohesion pillar of the UN COVID-19 Framework). The plan also contains macroeconomic-related actions to gender proof national budgets, to allocate oil revenues to fund benefits for women affected by conflict and micro-economic initiatives to bolster women’s entrepreneurship and livelihoods such as concessional loans for women heads of households and widows and support with managing small and micro-enterprises. Related to the health pillar is an action that aims to ensure ‘access to healthcare for all survivors of violence, including safe and legal abortion in cases of rape.’ It is important to consider reproductive care and access to abortion services as one of the critical services that should fall under the UN COVID-19 Framework’s aim to ‘maintain essential services’ during the pandemic.

---

**Figure 4** Percentage of actions on health across the six NAPs-WPS

- NAPs-WPS Actions on Health : 95%
- All Other NAPs-WPS Actions Relating to COVID-19 Response Framework : 5%

**Figure 5** Percentage of actions on economic recovery and macroeconomic response across the six NAPs-WPS

- NAPs-WPS Actions on Economic Response and Recovery: 11%
- Macroeconomic Response and Multilateral Collaboration: 1%
- All Other NAPs-WPS Actions Relating to COVID-19 Response Framework: 88%
DISCUSSION OF FINDINGS

A general discussion of the findings is elaborated here to highlight key points regarding the relevance of NAPs-WPS to the pandemic response globally, and to the six contexts of Iraq, Jordan, Lebanon, Palestine, Tunisia and Yemen specifically.

Women’s equitable participation in decision-making on national responses to the COVID-19 crisis is a critical gap. As noted above, there are significant disparities in countries such as Tunisia between women’s employment in the health sector and their decision-making roles in that sector, and in Lebanon in the low number of women in bodies overseeing the national COVID-19 response. The focus on women’s participation and leadership in the WPS agenda is a vital lens through which national COVID-19 responses are developed and implemented. Governance institutions are all involved in some way in responding to the health crisis and women’s leadership in these bodies is critical.

Many of the NAPs-WPS, such as those of Lebanon and Jordan, contain specific actions to increase women’s participation in national and local politics and in peacebuilding endeavours. A focus on implementing those actions should be maintained in the current crisis. For example, in Palestine, according to the Ministry of Women’s Affairs, women’s representation in COVID-19 committees is 16.6 per cent in the principle COVID-19 emergency committee, 8.3 per cent in the COVID-19 security committee and 60.8 per cent in COVID-19 local committees across different geographical localities. Although ideally the concentration of women’s participation at local levels should be matched at national levels, these figures signify important progress in women’s participation.

Further, participation commitments under the NAPs-WPS, and under other national gender equality frameworks, should be implemented through the structures, systems, programmes and policies adopted, and services put in place, to respond to COVID-19. For example, the Lebanon NAP-WPS is situated within broader commitments to gender equality including the National Strategy for Women in Lebanon (2011–2021), the National Action Plan for Human Rights, the National Youth Policy and the National Strategy for Preventing Violent Extremism. All of these national planning tools delineate clear parameters for the achievement of parity and women’s participation – all of which are relevant to equitable COVID-19 national responses.

Relatedly, NAP-WPS oversight mechanisms are ideal vehicles through which to advance concurrent implementation of the NAP-WPS in COVID-19 responses and ensure new conditions brought about by the pandemic inform implementation of the WPS action plan. The six NAPs-WPS were established by cross-government oversight bodies, with some that involved civil society organizations (CSOs) to varying degrees. Those structures could be used to enable simultaneous implementation of the NAP-WPS itself alongside the national response to COVID-19 and at the same time, used to

36. The Palestinian Ministry of Women’s Affairs (personal communication)
inform broader efforts to integrate gender equality in national COVID-19 responses. For example, the Lebanon NAP-WPS was developed by the National Commission for Lebanese Women (NCLW) that oversaw a steering committee including the former Office of the Minister of State for Women’s Affairs, the Ministry of National Defense, the Ministry of Foreign Affairs and Emigrants, the Ministry of Interior and Municipalities, the Ministry of Justice, the Ministry of Social Affairs, and three CSOs. The NCLW continues to oversee implementation across these stakeholders. This kind of structure – used to a degree in all NAPs-WPS and sometimes even transformed into monitoring bodies for plan implementation – could be the mechanism through which coordination across the NAPs-WPS in response to the pandemic is made. This approach would ensure that gender mainstreaming occurs in all COVID-19 responses in line with the NAPs-WPS and other gender equality commitments. NAPs-WPS entail the establishment of committees composed of relevant government agencies and, to some extent, CSOs. The COVID-19 response teams could benefit from the advice and recommendations of these committees. The structures adopted in Palestine also present this kind of opportunity (see Box 4).

Conversely, implementation of the NAP-WPS should pay attention to the impacts of COVID-19. All of the NAPs-WPS attribute responsibility for implementation to various government departments. Those same departments are responsible for aspects of COVID-19 response. There is ample opportunity for coherent and concurrent implementation of both sets of planning frameworks. Furthermore, the pandemic creates particular impetus for enhanced collaboration between NAP-WPS coordination bodies and health ministries and actors (if not already in the oversight body) to both improve immediate COVID-19 response and work together to deal with longer-term impacts including the inevitable effect on reproductive health-care services for women and girls.
BOX 4
Case study: Crossover between NAPs-WPS oversight mechanisms and national COVID-19 responses

In Palestine, a committee has been formed to oversee approaches to the COVID-19 crisis. The committee is responsible for the following tasks:

1) assess the needs and establish standard procedures to deal with suspected cases and persons who have been infected with COVID-19;
2) follow up and internalize World Health Organization criteria;
3) coordinate with neighbouring countries;
4) coordinate prevention and curative measures with relevant actors; and
5) raise public awareness of the virus.

The committee will make critical decisions about the COVID-19 response. The Ministry of Women’s Affairs is involved and also chairs the national committee on WPS. The Ministry has established 280 emergency committees at the grassroots level across different districts involving more than 1,500 women. The ground-level committees coordinate with the higher-level COVID-19 committee, in particular regarding support to women survivors of GBV. The opportunity to work together between the NAP-WPS coordination committee and the COVID-19 national response committee is a clear opportunity to enhance gendered national responses. The coming revised NAP-WPS, still under development, will also include aspects of response to COVID-19.

The most obvious area of overlap between the NAPs-WPS and the UN COVID-19 Framework is on issues of social protection (the “protecting people” pillar of the UN COVID-19 Framework). Actions in the NAPs-WPS that fall under that pillar relate primarily to responses to GBV, but also include education, broader social protection systems and humanitarian relief. The Lebanon NAP-WPS promotes actions that are particularly germane to the COVID-19 framework, such as using gender analysis in humanitarian response and in disaster preparedness. The Palestine NAP-WPS has relevant actions like ensuring women receive access to safe drinking water and food. These efforts all correspond directly with areas of action under the social protection pillar of the UN COVID-19 Framework. They are important practical measures under the NAPs-WPS and their ongoing implementation is critical on an ongoing basis, and become even more significant during a health pandemic.

Overall, across all of the NAPs-WPS, actions on GBV account for 47 per cent of the total actions related to the social protection pillar (61 per cent) of the UN COVID-19 Framework (see Figure 6). Across the six NAPs-WPS, there is a strong focus on preventing and responding to GBV, a trend that is evident in all NAPs-WPS globally. The Iraq plan, for example, has actions to train police in GBV.

response, amend laws towards women’s rights fulfilment and addressing GBV, provide shelter and collect data on incidents. In this way, the right laws, data collection methods and services will be ready to respond to GBV on an ongoing basis, as well when there are increased reports of violence and a growing need for services and shelters as a result of a health crisis like COVID-19. Notably, in Iraq there is a strong lobby for fast-track adoption and implementation of legislation on GBV as a result of the pandemic.38

Figure 6
Percentage of actions on GBV out of the total actions that fall under the COVID-19 protecting people pillar

Given the evidence that GBV has increased in the region and across the world as a result of the COVID-19 pandemic, there is also a need to ensure that, in the midst of the crisis, deliberate measures are taken to identify, reach out to and enable women and girls experiencing violence and abuse to report and access services (see Box 5 for implementation efforts of NAPs-WPS oriented to GBV and the pandemic). The UN COVID-19 Framework’s health pillar has an action to provide “[s]upport on tracking and reaching vulnerable populations”. It is important to cross-reference this health-related action with those under the social protection pillar, as well as make linkages across similar areas of action within the NAPs-WPS. In this way, the health and social protection pillars can operate in tandem to ensure that specific efforts to reach women in particularly vulnerable situations – such as those experiencing abuse, or those who are migrants or being detained – are all reached during the pandemic.

Regarding detention, there are specific actions outlined in the Tunisia NAP-WPS including “renovate the infrastructure of detention centres to ensure that their facilities meet international standards” and “upgrading the detention centres in line with the gender and human rights approach for all age groups to prevent sexual violence”. The Lebanon NAP-WPS contains the following action: “[c]onduct a study on the protection needs of vulnerable women and girls in Lebanon to identify existing and additional required protection services” and the indicator for this action includes “number of women in prisons.” While it is important to address GBV concerns within detention and correctional institutions, more attention on the general rights deficits of women in detention is also critical. Existing actions in NAPs-WPS should continue in the current pandemic and be used to ensure that actions in response to COVID-19 include protection for women prisoners.

38 Ban Barkawi (Reuters), “Iraq's stalled domestic violence bill may be revived by government”, 18 May 2020.
UN Women partnered with the National Commission for Lebanese Women (NCLW), and other actors, to prioritize some of the interventions under Lebanon’s National Action Plan on UN Security Council Resolution 1325 to scale up the work around gender-based violence in response to COVID-19. Specific priorities include legal reforms and providing shelters and accommodation for domestic violence survivors. A decree to establish a special fund for survivors of violence was prepared by the Ministry of Social Affairs and the Ministry of Justice, but has yet to be adopted. UN Women also delivered 500 “recovery bags” to women and girl GBV survivors and inmates in a women’s prison to address their immediate practical needs during the pandemic.

The devastating impact on macro, as well as national, economic systems as a result of COVID-19 is clear globally. The findings demonstrate that there are very few actions in the NAPs-WPS that focus on women’s livelihoods, business entrepreneurship and formal economic roles as well as their informal economic activities. This paucity occurs despite evidence pointing to the broader gap in support for women’s economic roles in post-conflict peacebuilding initiatives39 and the significant role that women play in both informal economic activities and in caring roles – all of which are relevant under the WPS agenda.

Important in the current crisis has been the ability of women’s organizations, international non-governmental organizations and UN agencies to rapidly adapt programming to the conditions of the pandemic so that initiatives supporting women’s economic activities can continue. Innovative approaches have been developed to ensure that women continue to receive payments when unable to be fully mobile due to confinement policies (see Box 6).

In Jordan prior to the pandemic, UN Women established a blockchain cash disbursement system for its cash-for-work programme that enabled continued payment during the pandemic. Through its Oases Women’s Empowerment Centres, those registered in the cash-for-work initiative could access their funds through iris-scanning technology thus avoiding any need for physical contact. The technology is available in World Food Program “supermarkets”. Furthermore, through WhatsApp groups, UN Women is able to disseminate information to women’s groups who can then share it with their communities.40

---

In terms of specific action plans, Jordan, Palestine and Tunisia have low percentages of actions on economic recovery and none on macroeconomic issues (see Figure 7). Many NAPs-WPS are oriented towards specific areas of state interest, such as state security and armed violence concerns, with little room for what may be the more basic and immediate needs of women affected by armed conflict, displacement and migration.

The Lebanon plan has an important outcome specifically focused on women’s participation in the economic sector: “Women’s participation in the economic sector is increased through policy reforms and a favorable environment and decent work and protections are provided for women in the formal and informal sectors” (Outcome 3).\(^\text{41}\) Specific actions include Intervention 3.1.2: “Conduct a national mapping to assess opportunities, needs, and gaps to promote women’s economic empowerment” and a commitment in its outputs to generate “favourable conditions including decent work and protections … for women in the formal and informal sectors”. These actions directly correspond with the economic response and recovery pillar of the UN COVID-19 Framework which includes an action to undertake “[r]apid and gender-responsive socioeconomic assessments and labour market and business environment diagnostics” and the macroeconomic response pillar of the framework, which includes an action to conduct impact assessments of the crisis, including the socioeconomic impact.

A key area of overlap between the NAPs-WPS and the UN COVID-19 Framework concerns the number of actions in the latter related to undertaking socioeconomic assessments and impact assessments under both the economic recovery and macroeconomic response pillars. The NAPs-WPS all contain actions related in some way to generating information, research and advocacy regarding the situation of women and girls related to plan implementation, including addressing issues like GBV and protection needs. For example, the Tunisia NAP-WPS – under the Information and Advocacy Axis – includes the following action: “Conduct studies on the social standards on which violence against women and girls is based”. The commitment to undertake such studies within NAPs-WPS can be used to influence the ways that assessments are undertaken to inform COVID-19 responses. In other words, socioeconomic and impact assessments for COVID-19 should include assessment of the specific effects of the pandemic on women and girls, as well as the gendered conflict, security and peacebuilding dynamics and their intersection with the pandemic.

Peacebuilding and social cohesion are both critical aspects of implementation of the WPS agenda. It is crucial to ensure that the COVID-19 pandemic does not reverse progress on peacebuilding regionally and that social dialogue and peace processes retain support and momentum wherever possible. As shown above, the Palestine (17 per cent) and Yemen (27 per cent) NAPs-WPS have the highest percentage of actions related to the social cohesion pillar of the UN COVID-19 Framework (see Figure 3, Figure 9 and Figure 10). Both NAPs-WPS contain actions that include the role of women in reconciliation initiatives, with the Yemen NAP-WPs aiming for 30 per cent representation of women in those processes.

These kinds of initiatives remain important during a health crisis. While policies such as confinement and social distancing may inhibit social interactions, it is vital that the principles of social dialogue and empowerment underpinning the UN COVID-19 Framework’s pillar on social cohesion are used to inform responses to the pandemic, such as supporting community-based initiatives to re-start immediately once restrictions are lifted.
globally. Across these plans, actions that aim to provide gender training, and ensure gender balance among security actors, help to establish a functioning security sector ready to respond in appropriate ways to crisis. On the basis of the Jordan NAP-WPS, for example, the Public Security Directorate and the Jordanian Armed Forces, deployed mixed female and male crisis teams to supply services to citizens during confinement and – with the support of UN Women – provided stress management assistance to these officers to deal with secondary trauma.
Clearly, the COVID-19 pandemic directly and indirectly impacts the global context of peace and security. Crises imply and require multisectoral governmental responses and engagement by military and security actors in terms of movement towards political settlements and peace, the United Nations system and its entities, humanitarian relief and peacebuilding organizations, statutory and non-statutory service providers in the areas of general health, reproductive health, shelters and protection services for violence against women and children, and the work and advocacy of civil society organizations across a range of related human rights and equality issues.

The depth and complexity of the intersection of conflict, gender, poverty, displacement and the pandemic cannot be dealt with by an individual governmental department or agency, nor are siloed and sector-based approaches up to the task. Rather, the crisis demands coordinated and collaborative multilateral approaches at the global level between states and regional entities, as well as among national-level actors. NAPs-WPS provide a clear starting point for the kind of coordinated planning needed to ensure that national responses to the health, economic and social impacts of the crisis reflect a gendered approach, accounting for the specific needs and potential contributions of all vulnerable populations, including women and girls.

The analysis of the NAPs-WPS through the UN COVID-19 Framework maps out clearly how they remain relevant in national responses to the pandemic. Where 64 per cent of actions across the six NAPs-WPS are directly in line with the recommended approach of the framework, NAPs-WPS must continue to be implemented during the pandemic in and of themselves, as well as part of the national response to COVID-19. The measures taken under NAPs-WPS – such as reform of laws on GBV, provision of shelters and overall services for GBV, support for women’s entrepreneurship and women’s leadership roles in decision-making forums and peacebuilding – are specifically relevant to a successful COVID-19 response. The key task now is for governments to sustain this momentum, to support implementation of existing NAPs-WPS and also ensure that gendered approaches are taken to COVID-19, including through cross-planning between those NAPs-WPS and the planning made in response to the pandemic. Furthermore, as current plans are revised and new plans adopted – such as the coming first NAP-WPS in Egypt – there is an important opportunity for learning from the pandemic to be incorporated into crisis planning.
RECOMMENDATIONS

Existing analysis and planning in each NAP-WPS should continue to be implemented during the COVID-19 pandemic and also inform new planning undertaken in response to the pandemic. Synergies between the NAPs-WPS and the COVID-19 crisis require clear identification so that the COVID-19 response reflects the WPS agenda.

Each country should undertake a full gendered analysis of the impact of the COVID-19 crisis on every context, including the intersection of gender, the pandemic and existing conflict, political contention and/or peacebuilding issues. A better understanding of the pandemic – achieved only by using a gender and equality lens – must be the basis of any national response.

Any opportunity for coherence between the departments of government responsible for overseeing implementation of the NAPs-WPS, and those overseeing response to COVID-19, should be identified and the congruency maximized (where feasible). This means that those departments with oversight of the NAP-WPS and the COVID-19 response need to ensure that WPS is part of the national response to the pandemic. It also means that governments should deliberately appoint people to their national response teams on COVID-19 who are involved in the NAP-WPS; the ministry responsible for the NAP-WPS should have a leading role in the COVID-19 response.

The national women’s machinery (NWM) should be funded and politically supported to take a leading role in mainstreaming women’s rights and gender equality in COVID-19 responses. The Arab State NAPs-WPS are led largely by NWMs that give these ministries a key role on the basis of the action plan, as well as through their primary mandates to advance gender equality through government. The NWMs should work across government to support gender analysis of the COVID-19 crisis, advocate for women’s participation in decision-making related to COVID-19 crisis management, response and recovery and shine a spotlight on stark gender inequalities such as the GBV exacerbated by the crisis.

Normative gaps in the WPS agenda, such as women’s formal and informal economic activities and women’s health, require specific attention in the future development of the WPS agenda and specifically in responses made to COVID-19. The analysis affirmed that support for women’s entrepreneurship, general livelihoods, as well as their predominant location in the informal economy is a gap in the WPS agenda and resulting NAPs-WPS. It needs much more attention as an urgent conflict and post-conflict gender equality imperative. Economic planning in the COVID-19 crisis needs to mitigate the risk of reinforcing gender stereotypes and expectations, the increased burden of care on women and girls, the lack of investment in their presence in the informal economy and enhance their potential for economic independence.

International and national actors engaged in emerging protracted humanitarian crises
due to the pandemic need to align their work with international commitments on gender equality, including the WPS agenda. They need to support attempts by governments to mainstream gender through COVID-19 response plans, particularly by implementing their NAPs-WPS. Measures taken to respond to the pandemic, including confinement and isolation strategies, and new ways to maintain essential services, need to be tailored to the specific situation of people residing in displacement sites, including refugees living in precarious situations.

Increased funding should be allotted to women’s organizations given the myriad roles they play in national responses to the pandemic. This includes supporting their community intervention roles such as information-sharing, community dialogue and peacebuilding so that trust and confidence in those organizations deepens at this time. It is also crucial to prioritize specific funding for GBV prevention and response services provided by civil society, as well as state services.

Responses to COVID-19 at global and national levels should not divert attention, funding or resources away from women’s rights and gender equality outside of the COVID-19 response. Responses to the pandemic should, as a priority, support and invest in the micro- and macro-level responses of women’s organizations to the pandemic, as well as help to sustain their regular focus of work. The enduring gendered human rights deficits, marginalization, exclusion, violence and abuse that women and girls experience will not go away during the pandemic; certainly, in some cases, the crisis will only exacerbate the issues.

A successful COVID-19 response is one that is fully informed by existing and updated gender analysis. At the global level, any normative bodies or operational mechanisms established by the UN to respond to the COVID-19 pandemic should situate gender and wider equality issues (race, ethnicity, age, sexuality and ability) and the WPS agenda as central to its ways of working. In conflict-affected and peacebuilding contexts, fulfilment of the women, peace and security agenda must be the paramount aim of all responses to the crisis.
(Footnotes)


5. ICG, COVID-19 and Conflict.


18. UN ESCWA, 18 March 2020.


20. Fawzia Al-Ammar and Hannah Patchett, The Repercussions of War on Women in the Yemeni Workforce (Sana’a Center for Strategic Studies, 23 July 2019).

