



المجلس القومي للمرأة
THE NATIONAL COUNCIL FOR WOMEN

EGYPT'S RAPID RESPONSE TO WOMEN'S SITUATION DURING COVID-19 OUTBREAK

First Edition
2020



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THE NATIONAL COUNCIL FOR WOMEN

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POLICY PAPER ¹

EGYPT'S RAPID RESPONSE TO WOMEN'S SITUATION DURING COVID-19 OUTBREAK

Situation Analysis

Egypt has a population of 100 million, of which 48.5 million are women, and about 5.8% of the population is aged 65 or above.² In March 11, 2020, the WHO declared that the COVID-19 outbreak is a pandemic.³ Recent experiences of other disease outbreaks, such as the Ebola and Zika, have shown that such outbreaks divert resources away from services that women need, even as their burden of care increases and their paid livelihoods suffer losses therefore recognizing the extent to which the COVID-19 outbreak affects women and men differently is hugely important. ***The impact on women in this health emergency is expected to be high.*** Together with other factors including age, disability, education, employment, and geographical location may intersect to further compound individual experiences in emergencies and the impact on them.

Women are more likely to be front-line health workers. Women make up around ***42.4% of human doctors*** and ***91.1% nursing staff*** of who are actually working for the Ministry of Health, in addition to ***73.1% of nursing staff in hospitals and therapeutic facilities in the private sector are women***⁴. ***Women in the health***

sector are more likely to be exposed to the virus and dealing with enormous stress balancing paid and unpaid work roles. Furthermore, overwhelmed health services may **limit access to family planning services and to contraceptives**, potentially leading to a rise in fertility rates and the socio-economic impact on individuals, households and communities. COVID-19 is expected to impact various sectors including health sector with **interrupted access of women to reproductive healthcare services and commodities**. Given that pregnant women are more likely to have contact with health services (antenatal care and delivery), they can be greatly exposed to infections in health facilities which may discourage attendance.

Women are also more likely to be engaged in short-term, part-time and other precarious employments/ contracts which offer poorer social insurance, pension, and health insurance schemes, lower payment and are particularly at risk in an economic downturn. COVID-19 poses a **serious threat to women's engagement in economic activities**, especially in informal sectors, and gender gaps can be increased in livelihoods. In Egypt, 18.1% of women are heads of households⁵. 40.9% of females' total non-agricultural employment is in informal employment and 33.9% of females' employment is vulnerable employment. Meanwhile 6.7% of female employment is in industry; 36.4% of females' employment is in agriculture; while 56.8% of female employment is in services and ⁶Egyptian women represent 70% of the paid care sector workforce (mainly as teachers, health and social workers). Moreover, the paid care sector in Egypt represents around 28–31 % of overall

female employment. ***Women are almost four times more likely than men to work in the paid care sector.***⁷

Norms dictate that women are the main caretakers of the household. The impact of the virus can mean giving up work to care for children out of school and nurseries and/or sick household members, impacting their levels of income and heightening exposure to the virus. Normally women bear domestic unpaid care work and spend longer hours than men on unpaid care work, the COVID-19 poses **higher burden on women's unpaid care work**⁸, as they play critical role with regard to families' hygiene and healthy behavior, and are at high risk of exposure to the COVID-19. Additionally, experiences have demonstrated that in such challenging times heightened risk of different kinds of violence (e.g., psychological and physical) might affect women. School closures, social distancing and containment strategies will impact girls and boys differently, especially adolescent girls who due to societal roles may be expected to take on unpaid care duties, limiting their access to remote learning programmes and might be faced with early child marriage.

The COVID-19 crisis is not only a health crisis, but also an economic and employment one. Disruptions, including movement restrictions, are likely to compromise women's ability to make a living and meet their families' basic needs. The situation poses different kinds of threats; however, it places women at the heart of the response efforts, **strengthening the leadership and meaningful participation of women and girls** in all decision-making processes

in addressing the COVID-19 outbreak gives them the chance to positively influence the design and implementation of Egypt's response policy and strategy.

The National Council for Women (NCW), according to law no.30 year 2018, is the mandated national women's machinery in Egypt, to propose responsive policies to women needs, legislations, action plans as well as conduct training programs and awareness raising mechanism for women. It has 27 active local branches that work closely with communities and community women leaders. It has reached out to 24 million women beneficiaries on ground in the past 4 years.

NCW is committed to provide evidence-based policy advice to support gender-responsive policies in the face of COVID-19 outbreak to the Government; and will be working with the various government partners to support the development and implementation of mitigation and response policies to ensure the protection of women and girls, both on the immediate and medium term responses, under the following pillars :

1-Impact on Human Endowment

(health, education and social protection)

2- Women's Voice and Agency

(Violence Against Women, Leadership and Representation)

3-Impact on Economic Opportunities

4- Promoting Data and Knowledge.

Noting that the success of the suggested policies & measures in this paper depends strongly on the cooperation and coordination of the efforts of all concerned line ministries, government institutions & civil society.

Women segments impacted by the COVID-19

The entire population is impacted from the COVID-19 outbreak; however, some segments of women are more prone to its threats. This policy paper will target these segments that include:

- * Women with health conditions (pregnant/lactating women)
- * Women at reproductive age, Women with immune diseases or chronic diseases, Elderly women; women in need and with less access to urban services; front-liners and workers at health facilities.
- * Women at orphanage and elderly shelters.
- * Women in fragile and informal work sectors (including temporary contracted women, domestic workers, street vendors).
- * Women working in tourism sector.
- * Women less skilled labor force at risk of losing their jobs; Women heads of households & women with disabilities & the National Council for Women (NCW) community workers involved in the knocking doors awareness campaigns.
- * Women in micro businesses; with special focus on the handicrafts' sector due to Egyptian women's domination to that sector as well as women working in the agriculture field.

Immediate recovery response

*The immediate recovery response is based on Egypt's **preparedness** through already existing support programs.*

1- Impact on Human endowments

Health Suggested Response Measures

Interrupted access of women to reproductive healthcare services and commodities

With the countries' resources (re)directed to fight the pandemic, women and girls may not have access to the needed healthcare services, including for women's reproductive care: safe delivery, contraceptives, and pre- and post-natal healthcare.

Response Measure (1):

Ensure a **sufficient stock of hygiene kits** as well as **necessary medical supplies** (including family planning methods for women as well as sanitary pads for women and girls) and provision of care through mobile clinics and emergency facilities. The content of these hygiene kits should be authorized by the Ministry of Health and according to its rules and regulations.

Response Measure (2):

A clear communication strategy to be designed to raise *awareness for women on prevention & precautionary measures* available through digital platforms as well as national TV & radio channels. Also how to adopt healthy behavior in a simplified way tailored to women from different backgrounds. Step by step programs to help care givers deal with suspected COVID-19 patients at home. With low levels of literacy - especially amongst women and girls - it is important that messaging is relayed through appropriate materials and means that are accessible and understandable by all. If mobile phones and other devices are used for awareness-raising, ensure that women and girls who have

less access to mobile phones and the internet are not excluded. Mixed methods that utilize multiple media options such as radio and visual graphics should be used. The healthcare response must provide messaging that pregnant women should continue with their natal care and seek out assisted deliveries. Such messaging should also advise them on precautionary measures they must take relating to their pregnancy. Healthcare workers should convey these messages.

Response Measures (3):

Provision of *nutrition & educational programs* on how to increase immunity with affordable natural ingredients.

Response Measure (4):

Provide priority support to women on the frontlines of the response, for instance, by improving access to women-friendly personal protective equipment and menstrual hygiene products for healthcare workers and caregivers, and flexible working arrangements for women with a burden of care.

Response measure (5):

Tailor awareness media messages to introduce means to elderly women and women with disabilities of all the governments of available healthcare services.

Mental Health

COVID-19 can cause stress, anxiety and fear. Sources of stress at the household level may arise as children stay at home and create competing demands for time and income decrease due to job loss or wage cuts. The pandemic can also increase fear from lack of information.

Response Measure (1):

Psychosocial support & therapy packages such as:

- 1) Develop online-recorded ***psychological sessions*** to raise awareness about impact of COVID19 and steps that can be done to endure the pressure.
- 2) Encourage community based solutions such as immediate volunteer therapists who can support health care givers to support women and especially health care givers and their families.
- 3) Conduct online group therapy sessions & family counseling.

Response Measures (2):

Develop long termed psychological support program for women especially women care givers & doctors and hospital front-liners.

Social Protection Suggested Response Measures

Response Measure (1):

Provide *immediate & increased social protection* programs such as cash transfer as well as immediate increase in food commodities & subsidized goods and discounts to all basic needs of women who are affected by the outbreak.⁹ Women – especially those in female-headed households – must be specifically identified and included in all cash and any other livelihood interventions, in ways that are safe for them to access

Response measure (2):

to compensate for school meals not being delivered, the government can **increase the points on the food subsidy card** to ensure nutrition-sensitive response to the outbreak in light of school closures.

Response measure (3):

Scaling up social protection Takaful & Karama to a larger number of vulnerable households, since it is mainly targeting women heads of households through:

- Building on the database of Ministry of Social Solidarity Takaful and Karama study rejected family's eligibility and cash transfer is quick through E-Wallets for immediate response.
- Increase existing food commodities that the Government

of Egypt offer to citizens through ration cards.

Response Measure (4):

Offer a One-time-Off Cash Transfer to Irregular women workers who may suffer economic and welfare losses due to the recent COVID-19 outbreak and risk falling into poverty. Payment can be done using mobile wallet or through post office or banks while promoting for social distancing concepts. This shall be done through: Existing financial inclusion policies & e-wallets offered by communication companies (Vodafone cash, Etisalat money & orange cash) or through 4270 Post office in all 27 governorates of Egypt or electronic cards such as meeza card.

Response Measure (5):

Upscale National ID program for women and initiate a digital mechanism to be implemented remotely so that women can be enrolled in SSN programs. This shall be done through: National Council for Women Citizenship ID Program that has reached out to 700,000 women.

Response Measure (6):

National Awareness raising to allow information about 1) Means of enrollment in any social protection program (including ID issuance). 2) Targeting the households to explain the stress within the whole family that can arise from the outbreak 3) explaining basic concepts of subject matters for young children under 12 years old.

Response measure (7):

Register **irregular women workers in database** of MOM, and MOSS to be included in economic emergency measures such as cash transfers and sickness benefits. A massive media campaign shall be conducted to aware women about means of registering.

Social protection interventions for Elderly and Women Living with Disability suggested Response Measures

Older women living alone or within families, disabled, and those with certain health conditions require special attention because of their increased risk for severe COVID-19. Given the fact that formal elderly care programs in Egypt are not yet that frequent, and family support is the most common practice, additional measures to help household caregivers could also be useful, not only during this period but in the long-run. These could include:

Response Measure (1):

- a) Promote household plans on the needs and daily routine of the household members, including access to several weeks of medications and supplies in case there is a need to stay at home for prolonged periods of time;
- b) Implement online community actions designed to reduce exposures to COVID-19 and slow the spread of the disease.
- c) Implement online community social activities for the specific population.
- d) Create a national supply distribution helpline (for medicine, advice, etc.) & develop accessible information on COVID-19 responsive to family caregivers of older people, and disabled; and
- e) Implement more flexible measures from employers for those employees that are caregivers of old or disabled family members.

Educations' suggested Response Measures

With schools closing as part of social distancing measures, girls who already face pressure to drop out of school may not return. Parents may pressure their daughters to drop out of school to care for siblings and do other unpaid domestic work, contribute to supporting their households financially, and/or marry and have children when they are still children themselves. These pressures may be heightened due to interruptions in their education.

Response Measures (1):

Where possible, efforts should be made to incentivize parents to allow their children to return to school.

Response Measures (2):

Encourage families to use distance-learning solutions such as using educational applications, platforms and resources.

Response Measures (3):

Accelerating the efforts concerning the proposed draft law criminalizing child marriage to take its legal course and to be issued. This measure on the policy and legislative level will ensure that the impact of the closure of the schools will not increase the number of child marriage.

Response Measures (4):

Strengthen & enhance promotion of the child help line of the National Council for Childhood and Motherhood (NCCM) through different media means.

Response Measures (5):

Upscale the social services provided by Ministry of Social Solidarity (MoSS) to provide shelters for possible street girls who can easily catch COVID-19 & be exposed to violations especially during lockdown hours.

2- Women's voice & agency

Violence against Women

Experiences in such crisis may place women at heightened risk for violence due to heightened tensions in the households. Psychosocial, legal and counseling support should be available for women who may be affected by the outbreak.

Response Measure (1):

Promote for intensified ***preventive measures for any potential increased domestic VAW*** as result of the existing health precautionary measures such as: 1) promote for NCW's Complaints Office's receiving-hotline 2) upgrade its capacities through COVID19 related guidelines 3) Adopt precautionary measures & sterilize the women shelters and apply all health measures to them (in preparation of dealing with expected VAW incidents). This shall be done through:

- Women Complaints office in NCW which is mandated to offer legal consultations and lawyers services for women free of charge in any case of violence or discrimination facing them. The WCO has branches in all 27 governorates of Egypt.
- 8 Shelters for women who might be subjected to violence in Egypt under the supervision of Ministry of Social Solidarity.

Response Measure (2):

Intensify the capacities of NCW in Egypt to deal with the situation efficiently & effectively through strengthening its technological infrastructure as well as provision of necessary guidelines to intensified precautionary measures to prevent COVID-19 infections.

Leadership and decision making.

Better inclusion of women frontline workers in health and other sectors in all decision-making and policy spaces can improve health security surveillance, detection, and prevention mechanisms. Women also play a major role as conduits of information in their communities in spite of their typically less access to information than men. Thus, reaching women and girls and educating them on the disease is crucial to tackling the spread.

Response Measures (1):

- a) Strengthen the leadership and meaningful participation of women in all decision making processes in addressing the COVID-19 outbreak; and
- b) Ensure that women are able to get information about how to prevent and respond to the pandemic in ways they can understand.

Response Measures (2):

Representation of women in designing policies and strategies can contribute significantly in preparedness to reduce vulnerability to disasters, in capacity building, and the response to COVID-19.

Medium Term interventions

The medium response interventions shall rely on already existing mechanisms or the initiation of new mechanisms. That shall include:

3 -Impact on Economic Opportunities:

COVID-19 outbreak created supply-side shocks for labor markets rapidly evolving into a joint supply and demand crisis.

Due to health concerns, illness, travel bans, quarantine measures and other mobility constraints, therefore many workers cannot get to work; when they don't work, productivity and with that, often incomes, are affected. In terms of labor demand, global and local supply chains have been disrupted; across many countries, businesses have been closed or remain open only limited hours; even when operating, lower consumer demand affects earnings. The ongoing crisis, and the uncertainty surrounding its duration and impacts, create an environment where investments and new hiring are deterred. Permanent business closures, rising unemployment, decrease of remittances and loss of livelihoods are big concerns.

Given the nature of the employment crisis amidst COVID-19, there is a need to address two, interconnected issues. First, supporting women workers whose livelihoods are affected because they are unable to work due to quarantine, health concerns or sickness; or have seen their income from self-employment fall due to lower demand; or because their place of work has been closed, has laid-off employees, or has asked for workers to work fewer hours. Second, the need to provide businesses that have been forced to close or are seeing their revenues decrease significantly with the liquidity necessary to survive the shock, meet payroll, and be ready to recover when the economy picks up.

Response Measures (1):

Directing & reallocating the donor partner agencies' funds towards the development of the ***technological***

infrastructure especially in the remote areas, as well as in projects that can uplift the IT sector, encouraging more women to engage.

Response Measures (2):

Conducting **market assessment, income-generating activities assessment, and economic analysis** to identify and highlight the types of startups that are of potential growth in the coming future due to the changes in the entrepreneurship ecosystem; also for later interventions, including developing targeted women's economic empowerment strategies and exploring cash transfer options to alleviate the impact of the situation, including supporting them to recover and build resilience for future shocks

Response Measures (3):

Developing **economic support programs & packages** for women to be able to revive the outbreak under the umbrella of Ministry of International Cooperation (MoIC) & National Council for Women (NCW)'s Egypt gender accelerator in partnership with the World Economic Forum.

Response Measures (4):

Enhance **financial inclusion of women** through upgrading and upscaling the Village Savings & Loans Association (VSLA) program and promoting for the use of E-Wallets for women and building up on NCW, Central bank of Egypt (CBE), Alex bank & CARE Egypt's pilot for digitizing the VSLA model.

Response Measures (5):

Conduct widespread **awareness campaigns on teleworking for women and part-time work arrangements and basic financial/digital literacy programs**. These should include basic information to be broadcasted on national TV/ radio. Social media

can be another effective channel.

Response Measures (6):

For women led SMEs: provision ***of financial and non-financial assistance to SMEs*** to help them cope with the business disruptions (tailored package for women-led SMEs). Collaborating with technology companies to provide SMEs and the self-employed with ***free/discounted access to internet and technological tools***. NCW through Women Business Development Center will use their social media platforms to highlight women in the micro business' sector to support them in ***networking and linkage to the SME led businesses and private sector for exposure***. This can be an opportunity for the business sector as well who will interact with skilled home-based labor acting as a win-win situation ensuring social distancing.

Response Measures (7):

Create ***an interactive digital referral pathway for information*** allowing timely access to information to each target group and directing them to different services.

Response Measures (8):

Integrating ***additional benefits*** for women healthcare providers & future protection schemes.

Response Measure (9):

Revamping MSMEDA's efforts of deploying ***“cash for work” through labor intensive public works programs*** which can play a role in helping the government addressing temporary women unemployment. Jobseekers in the agricultural or urban informal sector can benefit from public works in times of crisis. Public work programs that are well designed in terms of the length of the employment contract and the level of wages can provide adequate

protection to low-income jobseekers without reducing incentives to work or search for jobs that arise when the economy rebounds.

Response measure (10)

Investment in **digitalizing women-run businesses and development of online platforms** to allow cooperatives and women run handicrafts services to continue to operate

Response measure (11):

Within the framework of the ongoing MOSS-NCW-ILO partnership, Upscale **Get Ahead and Financial Education Trainings**, ensuring that in the selection process, priority and further support will be given to women who have been directly or indirectly affected by the COVID-19 outbreak also with special focus to be given to women in agriculture

Response measure (12):

Increase social and home services and facilitate mobile cash transfer payment and home delivery of benefits in kind for elderly women.

4. Promoting Data and Knowledge

Promote the compilation of data disaggregated by sex, age and disability related to COVID-19 outbreak including tracking of the emergency response in order to understand the difference in exposure and treatment as well as design preventive measures accordingly.

Response Measure (1):

Capitalize on Ministry of International Cooperation (MOIC) - NCW's partnership with the **World Economic Forum and Egypt Gender Accelerator**¹⁰ to conduct further sector specific evidence-based research on COVID-19 impact on women and girls and publish all material under the Egypt National Observatory for Women.

Response Measure (2):

Support **policy research and social innovation** to design new programs to support women and to identify opportunities.

Response Measure (3):

Support the Egypt National Observatory for Women (to identify information gaps and to design, collect and disseminate indicators to be used in the short term and in the medium term for **monitoring and evaluating the impact of the pandemic**).

Response Measure (4):

Conduct **regular public opinion surveys to determine the economic, social and psychological impact of the COVID-19 on Egyptian women**

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Response Measure (5):

Ensure availability of ***disaggregated data by sex, age and disability*** to be induced within the already collected data including information about the profession whether formal or informal jobs and its nature to be regularly published under the ENOW