Women and girls are negatively and disproportionately impacted by disasters and conflict. These crises affect their life expectancy, education, maternal health, livelihoods, nutrition and the levels of violence they experience. Women are also often first responders and leaders in humanitarian response, though they are often portrayed only as victims and passive beneficiaries of aid. All humanitarian action should include a gender analysis to determine the specific needs of women and girls, and design programming activities that are targeted and tailored to these specific needs. However, whilst we know the magnified impact of crises on women and girls, what remains unclear is to what extent humanitarian interventions that address women and girls are –or are not– being funded, and the consequences of any shortfall. Where information does exist, funding levels remain low. For example, in 2018, funding for Gender Based Violence (GBV) was only 0.3% of total humanitarian funding. Clarity on existing levels of funding for women and girls in humanitarian programming is critical as a basis for taking action to ensure that the needs of women and girls are met, and to achieve effective –as well as rights based– humanitarian outcomes.

The impact of the COVID-19 crisis on women and girls brings these issues into sharp focus. Women not only face multiple and compounded burdens from this crisis, but they are already emerging as the frontline workers in the response. Around the world, women make up 70% of health care workers, and most of them are midwives, nurses and community health workers - they are indeed on the front lines of efforts to combat and contain outbreaks of the disease, emphasizing the gendered nature of the health workforce and the increased risk of infection. Women are also much more at risk of contracting the virus because of the central
role that they play as caregivers in their family and community for those who fall ill. The current outbreak of COVID-19 is fast becoming a protection crisis; the combination of economic and social stresses brought on by the pandemic, as well as restrictions on movement, have dramatically increased the numbers of women and girls facing violence and abuse, including intimate partner violence, other forms of domestic violence, and sexual violence and abuse, with surges in many cases upwards of 25%. More than half of all maternal deaths take place in countries affected by humanitarian crisis and fragility, and maternal mortality is expected to spike due to a lack of access and mobility, and strain on the health sector. Resources for sexual and reproductive health (SRH) and rights are also compromised. The health implications of this virus are only the tip of the iceberg. The ramifications of loss of life and livelihoods will have impacts that last for decades.

However, it is also important to avoid casting women and girls solely as victims and/or vulnerable to heightened risk. Their contributions to ensuring the most effective preparedness and response plan will be crucial, especially in community mobilization, information dissemination and case management. This is evident in public health emergency response strategies, as recently seen in the Ebola and Zika crises. Furthermore, as international agencies repatriate their staff, and movement becomes more and more restricted, local grassroots organizations are carrying the weight of this response. It is crucial that their contributions and capacity are supported through facilitated access and adequate funding.

A recent report by UN Women, United Nations Population Fund (UNFPA) and The Share Trust has found that global funding for women and girls in humanitarian crises has been falling significantly short of requirements. The analysis is unique because it not only distinguishes between the amount of funding requested and the amount of funding received to ascertain the funding gap, but it also audits and recodes project gender markers to specifically determine the amount of funded activities that target or tailor their approach based on the specific needs of women and girls. This auditing process was carried out for Bangladesh, Nigeria and Somalia for 2017-2019. The study findings are as follows:

- **The amount of funding in 2019 that was categorized as including targeted and tailored programming for women and girls was significantly overstated**, with over 25% of the humanitarian response incorrectly classified as using a program design with activities tailored or targeted to the specific needs of women and girls.

- **While the amount of funding requested for programs that account for the specific needs of women and girls has increased, it still falls significantly short of the overall request.** On average, across the three countries, only 65% of the total funding requested mainstreamed the needs of women and girls, despite a clear mandate to incorporate the needs of women and girls throughout all aspects of a humanitarian response.
• **Programs focused on women and girls are disproportionately underfunded compared to the overall response; targeted programs have the lowest levels of coverage.** Whereas coverage (funding received as a proportion of funding requested) for the overall response across the three countries averaged 69%, coverage for funding that tailored activities to the specific needs of women and girls averaged 61%, and funding coverage for programs that targeted specific activities, for example GBV or SRH services, averaged just 39%. Separate studies have found similar findings for funding coverage globally, with ranges between 31%-33% for GBV, 43% for reproductive health, and 50% for child protection, indicating substantial gaps in funding for women and girls.

• **The combined effect of low levels of funding - both requested and received - signifies a double threat for programming for women and girls – programming that is often lifesaving and yet not receiving adequate support.** Not only is the amount of funding requested for women and girls falling significantly short of the overall request, but it is then disproportionately underfunded.

• And yet, the global evidence clearly indicates that the benefits of gender focused action are sizable and justify more intensive funding, delivering average returns of $8 for every $1 spent.

**Funding Requested and Received for Programming Targeted and Tailored to the Needs of Women and Girls, as Compared with the Overall Response**
A CALL TO ACTION

These shortfalls indicate that the role of women, their voice and decision making, and their access to basic services to protect their health and human rights, have been neglected. There is an urgent need to ensure that funds targeting women on the frontline of this new crisis do not fall short. Increased investment to close the funding gap on life-saving programming is urgently required, especially within the context of this crisis. There is already an urgent need for greater levels of funding for women and girls across the many humanitarian crises across the globe. The COVID-19 crisis compounds the risk for women and girls, and it is essential that funds for the COVID-19 crisis are additional. We call for the following actions:

- **Urgently upscale funding and programming for life-saving services for women and girls -- including gender-based violence and sexual and reproductive health.** There is an immediate need for increased investment to close the funding gap on programming for women and girls within the context of the COVID-19 crisis, as well as in response to humanitarian crises globally.

- **Prioritize funding streams for local women’s organizations, groups and networks as frontline responders in both the short, medium and longer term, alongside a greater role in designing and delivering the response.** Local actors are often first responders, but receive a tiny proportion of overall humanitarian funding. In the COVID-19 crisis, as movement is heavily restricted, the central role that these organizations play in delivering a humanitarian response is magnified. Women’s groups are on the frontline of this response, and should play a key role in the design and delivery of the response.

- **Funding for gender transformative programming – i.e. not only improving women’s access to key services, but also helping communities and systems to understand and challenge the social norms that perpetuate inequalities – should be prioritized alongside life-saving action.** This expansion is critical to build durable solutions as part of the Humanitarian Reform agenda, and to bridge the humanitarian-development divide. Gender transformative work is fundamentally reliant on transforming the norms and behaviors that maintain discriminatory gender roles, and yet social norms work is one of the least funded areas. While these types of activities are not seen as “life-saving” and often fall well outside a short term humanitarian remit, a lack of funding in this space is directly affecting the ability of women and girls to access basic services.