

# Promoting an Inclusive Recovery by Prioritizing Gender: A “Care, Cash, and Data” Agenda for the IDA20 Replenishment

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The World Bank estimates that the global pandemic could push between 55 and 63 million people into extreme poverty in IDA (the International Development Association) countries. With IDA being the largest source of concessional loans and grants for the world’s poorest countries, its upcoming replenishment cycle (IDA20) is a key opportunity to promote a more inclusive recovery—and, in particular, one that reaches and benefits women and girls disproportionately hurt by the COVID-19 crisis.<sup>1</sup>

Against the backdrop of contracting fiscal space—in both donor and recipient countries—and competing priorities for IDA resources, establishing a robust agenda to promote gender equality for IDA20 is an imperative. IDA has sustained around \$35 billion a year in loans and grants throughout the COVID-19 period and is aiming to maintain that level for at least the first two years of IDA20. But this will require achieving a larger financing envelope for IDA20, which can be done through a combination of donor grants and market borrowing.<sup>2</sup>

In addition to robust funding support, an inclusive recovery will require grounding policies and investments in the reality that COVID-19 has been a gendered crisis—one that has exacerbated pre-existing economic and social gaps disadvantaging women and girls. According to hundreds of studies synthesized through CGD’s [COVID-19 Gender and Development Initiative](#), as well as [original data analysis](#), sectors where women predominate as employees and entrepreneurs have been harder hit by lockdown measures and resulting economic contractions. Combined with increased unpaid care work burdens, this means that women have exited the workforce at higher rates than men, and women-

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1 The IMF Poverty Reduction and Growth Trust is another large source of concessional finance for the world’s poorest countries, but provides mainly balance of payment support, unlike IDA which provides project finance and budget support.

2 See <https://www.cgdev.org/publication/ida-20-donors-must-go-big-and-ida-must-too>.

owned businesses have closed their doors at higher rates. [Violence against women](#) has increased across countries. Women's [mental health](#) has been more severely impacted because of the pandemic, and women and girls have faced [significant barriers to access sexual and reproductive and other health services](#).

To address the gendered impacts of the COVID crisis, CGD researchers working through the [COVID-19 Gender and Development Initiative](#) have proposed three priority focus areas: care, cash, and data.

- **Care:** Governments, with donors' financial and technical assistance, should strengthen labor market policies and programs to ensure they benefit women, including by prioritizing investments that reduce and redistribute women's unpaid care work.<sup>3</sup>
- **Cash:** Because the economic effects of the crisis will long outlast COVID-19's direct health effects, governments and donors should continue to provide cash transfers to vulnerable populations, placing a priority on targeting women, as part of a medium-term recovery strategy.<sup>4</sup>
- **Data:** Governments and donors should monitor and evaluate the benefits of COVID-19 mitigation and recovery measures on women and girls, as well as strengthen broader data systems to ensure they reflect women's and girls' lived realities.

Applying these recommendations to the IDA20 replenishment, there is an opportunity to (1) increase prioritization of care in IDA20 commitments and results frameworks to encourage investment in this critical area; (2) ensure that stimulus efforts and social protection schemes are expanded and reach women, and (3) close gender data gaps to both inform and track progress of IDA investments in advancing gender equality. Below we outline more details on each area and propose IDA-specific opportunities to accelerate progress.

## INVESTING IN HUMAN INFRASTRUCTURE THROUGH A CARE AGENDA

### IDA20 recommendations:

- **Include a target to support at least 10 countries to develop national care strategies.**
- **Adopt a target that at least 50 percent of jobs projects have a care component to ensure women's equal participation and benefit.**
- **Commit to match external donor financing for care projects and/or research in IDA countries.**

COVID-19-induced school and childcare center closures have put the spotlight on caregivers in high-income countries having to balance paid and unpaid work. As a result, attention and empathy

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<sup>3</sup> Women also perform the bulk of paid care work globally, including as 70 percent of the world's frontline health workers, and women and girls in some contexts have experienced disruptions to accessing maternal, sexual and reproductive health services, as well as other forms of essential healthcare. Donor institutions should also prioritize maintaining and strengthening gender-responsive investments in health systems.

<sup>4</sup> Another form of needed "cash" is stop-gap financing to women-owned firms, which have been more likely to close because of the COVID-19 pandemic, and sectors where women are concentrated (e.g., tourism, retail, services), which have been harder hit by slowed economic activity due to COVID containment measures.

around the global childcare crisis have increased. In addition, the COVID-19 crisis has exacerbated the vulnerability of elderly and sick populations, highlighting women’s role in caring for the sick and elderly and amplifying the need for investments in quality care.

Juggling paid and unpaid work without formal forms of support is a commonplace reality for caregivers—often women and girls—in lower-income settings. The World Bank’s recent *Better Jobs and Brighter Futures* report reflects that the childcare challenge disproportionately impacts families in low- and middle-income countries, where nearly 8 out of 10 need childcare but do not have access. A child in a low-income country is five times less likely to have access to childcare than a child living in a high-income country. At the same time, addressing the global childcare crisis presents a significant job creation opportunity: it is estimated that 43 million new childcare jobs are needed to meet the current gap in access.

By the same token, there is a massive and growing gap in availability and access to affordable elder care. The [World Health Organization](#) estimates that elderly populations in low- and middle-income countries are more likely to be care dependent than persons of the same age group in high-income countries. Up to 50 percent of those aged 65-74 in low- and middle-income countries are care dependent, often relying on unpaid care of daughters and other women family members, and those estimates predate the COVID-19 crisis.

The increased focus on care in the COVID-19 context builds on a steady rise in attention to this issue among multilateral development banks, as well as governments, as policymakers increasingly recognize care as critical “human infrastructure”—enabling job creation, increased labor force participation and productivity, and the accumulation of human capital. Care sector jobs are less at risk of automation than other sectors and can help to ensure inclusive, sustained development.

But, huge gaps in political will, policy attention, and financial investment remain. The [COVID-19 Global Gender Response Tracker](#), compiled by the United Nations Development Programme in collaboration with UN Women, reflects how few governments have addressed care constraints in their COVID-19 crisis response and recovery plans. Just 5.8 percent of the 3,000+ policy measures compiled by the tracker directly support unpaid care work, with only one policy measure announced by a low-income country government (Burundi’s policy on providing meals at care facilities), and just 16 from lower-middle-income countries.<sup>5</sup>

With IDA positioned as the largest source of concessional loans and grant finance for the world’s poorest countries, and its far-ranging reach across economic and social sectors, its upcoming replenishment cycle is an important opportunity to promote investments in childcare and broader care work as an IDA replenishment priority, particularly by including for the first time a specific target against which progress could be measured.

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5 Less is known about the extent to which donor institutions are focusing on care in their COVID-19 response efforts. Recognizing a gap in the evidence regarding donor institutions’ current and historical childcare-focused efforts, researchers for CGD’s [COVID-19 Gender and Development Initiative](#) are working to establish a baseline, exploring the extent to which multilateral development banks have invested in childcare to date. In a forthcoming policy note, we review projects, technical assistance, and advisory efforts focused on childcare from multilateral development banks to deepen collective understanding of the level and nature of childcare efforts across institutions, including whether the COVID-19 crisis has spurred increased commitment to this agenda.

## The IDA gap to fill

In a review of past IDA replenishment reports, results frameworks, and special theme papers on gender and development, we find some references to childcare—or broader unpaid care work—as a binding constraint to women’s economic opportunity and equality, but no translation of this reality into specific action items or targets by which to measure progress.

Though the [IDA19 special theme paper on gender and development](#) includes a few references to care (notably highlighting the IFC’s [Tackling Childcare](#) report and related operations), accompanying indicators and targets are absent from both the [gender-specific](#) and [overarching IDA19 results frameworks](#). The [IDA19 replenishment report](#) makes just one mention of care, in reference to the need to engage men and boys in more care work.

Similarly, the [IDA18 special theme paper on gender and development](#) includes a handful of references to childcare and broader unpaid care work, but this does not translate into a concrete action plan to drive progress on the issue. The [IDA18 replenishment report](#) only mentions unpaid care through narrow references to women in refugee settings and pandemic contexts, and there is no mention of unpaid care in the [gender-specific](#) or [overarching IDA18 results frameworks](#).

[IDA17](#) and [IDA16](#) replenishment documents (final reports and results frameworks) do not mention childcare or broader unpaid care. The [IDA17 special theme paper on gender](#) lacks any reference to unpaid care, whereas the [IDA16 special theme paper on mainstreaming gender](#) references care as it relates to reducing child malnutrition and within the context of HIV/AIDS and other epidemics.

Finally, the [ABCs of IDA](#), highlighting IDA projects’ key achievements by county, including those focused on [gender equality](#), do not reference childcare or broader unpaid care work.

Despite IDA replenishment documents’ lack of focus on childcare and broader unpaid care work, many IDA projects have a care component. The [IDA19 special theme paper on gender and development](#) states that “[in FY17 and FY18, IDA financed 14 new operations \(US\\$895 million\) to support affordable care services.](#)” This amounts to 2.1 percent of IDA financing across FY17 and FY18, though the specific percentage of funds allocated to support childcare services, elder care, or care for those living with disabilities is unclear.

## SUSTAINING AND EXPANDING A CASH AGENDA

### IDA20 recommendations:

- **Match on a 1:1 basis every policy-based allocation dollar a country invests in projects that establish or scales up a government-implemented cash transfer program with a “cash plus” design that aims to enhance women’s economic empowerment and broader agency.**<sup>6</sup>
- **Include a target to support at least 20 countries to invest in “cash plus” programs aimed to enhance women’s economic empowerment and broader agency.**

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<sup>6</sup> This approach would be loosely based on the IDA Regional Window which provides matching funds to governments that invest in regional projects.

Well-deployed “cash” will be a critical instrument to help ensure an inclusive recovery. Cash transfers and other forms of social assistance directly targeting women to support them and their households in the face of lost employment and income can help mitigate increases in poverty and food insecurity. “Cash plus” designs, those that bundle cash transfers with other features, such as assets, training and coaching, can further ensure that recipients access income and build livelihoods.

Cash transfers are a policy lever of choice around the world, particularly because income loss has been so extreme and because existing social protection systems can aid in getting relief out quickly in a crisis. [As of December 2020](#), over \$800 billion had been allocated to social protection response efforts during COVID-19 across 126 countries. While many of these policies have made efforts to target women and address their gender-specific constraints, the majority have not. According to the [COVID-19 Global Gender Response Tracker](#), cash transfers targeted specifically to women account for just 2.5 percent of all national COVID-19 response policy measures, and only 19.8 percent of all cash transfer measures. Only 33 cash transfer measures were implemented in low- and lower-middle-income countries, and at least half of the cash transfers specifically targeting women are one-off payments or otherwise temporary. Where the economic impacts of the pandemic are likely to long outlast the health impacts, and where women’s employment may be slower to rebound, it is critical that cash transfers be maintained in the medium term and bundled with other forms of needed support.<sup>7</sup>

## The IDA gap to fill

The [ABCs of IDA](#) include several references to social protection programs from previous years and their inclusion of women. Cash-for-work programs in Comoros, the Democratic Republic of Congo, and Malawi included 68 percent, 46 percent, and 53 percent women participants, respectively. Cash transfers in Yemen, Mali, Mauritania, and Nigeria reached 47 percent, 50 percent, 88 percent, and 92 percent women.

In a review of past IDA replenishment reports, results frameworks, and special theme papers on gender and development, we find references to cash transfers and other forms of social protection, but the first gender-specific social protection target does not appear until the most recent (IDA19) replenishment report: “At least 20 IDA [fragile and conflict-affected states] country portfolios will support improvements in social sector service delivery (i.e., health, education, and social protection), with a focus on addressing the differential constraints faced by men and women, boys and girls, and by people with disabilities.”

This objective is focused on fragile and conflict-affected states, and though gender-differential constraints are noted, there is no quantifiable target attached to either the social protection element or the number of country portfolios supported to address gender-specific constraints. There is ample room to build upon the language reflected above to include more specific target on cash transfer (or broader social protection) programs, including those that reach and benefit women and girls.

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<sup>7</sup> Tailored support to women-owned firms and sectors where women are concentrated as workers is also critical. According to International Labour Organization data, the employment loss measured in working hours for women worldwide was 5.0 percent in 2020, versus 3.9 percent for men. The employment-to-population ratio fell 2.6 percent for women, compared to 1.8 percent for men in low-income countries. Diverging from past crises, sectors where women predominate as entrepreneurs and wage workers have been harder hit, and we have yet to observe an “added worker effect” among low-income women to help families cope with loss of household income.

## CONSOLIDATING AND CONTINUING DATA GAINS

### IDA20 recommendations:

- **Include a target to support at least 30 countries to build capacity to reduce gaps in the availability of core data for evidence-based policy making, including data that reflects the specific needs and constraints of women and girls and other vulnerable groups.**

The COVID-19 pandemic derailed traditional methods of data collection, and, to date, much of the country-specific evidence on the crisis's impacts come from rapid response phone and internet surveys. An estimated 26 percent of women in developing economies do not have access to phones, and thus would not have their experiences captured in such surveys. This has greatly restricted the generalizability of the evidence base thus far, and the impact of COVID-19 on women, especially those living in poverty, may be severely underestimated.

These challenges exacerbate long-standing measurement challenges around women's work, especially in the informal and unpaid care economies, and the dearth of disaggregated social protection coverage data. Currently, only 41 percent of low- and middle-income countries report gender-disaggregated data on informal jobs, and there is a need to invest in statistical capacity to collect and use data on work, social protection coverage, and other areas to track the gendered impacts of COVID recovery efforts—and longer-term policymaking and investment.

The [COVID-19 Global Gender Response Tracker](#) does not systematically capture whether or not national governments are collecting or harnessing gender data to inform policy response efforts; within the tracker, gender data collection efforts are only detailed in relation to policies aimed at addressing violence against women.

### The IDA gap to fill

From March through December 2020, the World Bank approved 129 projects to low- and middle-income countries, but only 52 percent of these include indicators or targets calling for sex-disaggregated data. This is commendable, especially in the rush to disburse funds to support client countries in the midst of crisis, though it does reflect a marked decrease from the pre-COVID period: the IDA19 replenishment report reflects that “IDA projects increasingly reported sex-disaggregated data: 75 percent of IDA project Implementation Completion and Results Reports presented sex-disaggregated or male- or female-specific indicators, with a further 13 percent reporting on the share of female beneficiaries.” Furthermore, only 13 percent of COVID-era World Bank projects include indicators or targets calling for intersectional data—i.e., data disaggregated not only by gender but also migrant status, disability status, age, or other demographic characteristics.

Previous replenishment reports have identified gender data as a priority. Below is an illustrative target from the IDA19 report that could be extended: “Support 30 IDA countries, including those with ongoing statistical operations, to support institutions and build capacity to reduce gaps in the availability of core data for evidence-based policy making, including disaggregation by sex and disability.”

## Conclusion

The upcoming IDA20 replenishment is an opportunity to consolidate and scale up the World Bank's support to promote gender equality. Throughout the rest of the year, World Bank shareholders and IDA management will negotiate both the level of financing and substantive priorities for the IDA20 replenishment. The "care, cash, and data" priorities outlined in this brief provide an initial policy roadmap for IDA20 focused on prioritizing evidence-based interventions that mitigate the COVID-19 emergency's impact on women and girls and set the stage for an inclusive recovery.



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