Gender Blind Spots in COVID-19 Containment and Mitigation Measures in Burkina Faso and Ghana

Akosua K. Darkwah, Dorte Thorsen and Madeleine Wayack Pambè

Abstract

This article unpacks the gendered impacts of the containment and mitigation measures adopted in many countries to deal with the pandemic. Based on detailed data on the inclusivity of measures taken to contain the outbreak of COVID-19 in Burkina Faso and Ghana and the mitigation measures implemented to soften the fallout, the paper analyses the impact on women and girls. We argue that women occupy important micro-economic places in both countries, as breadwinners in families, and in informal trade, which accounts for a considerable proportion of the economy. However, there was little state recognition of the ripple effects of the closures of borders, markets and schools on them. The lack of recognition of gender differences and of the ways in which gender intersects with economic and regional inequalities was reinforced in the mitigation policies as well, undermining the advancement of gender equity goals made prior to the pandemic.

Introduction

Since the 1980s, when neoliberalism became the dominant economic framework for managing the economies of the world, public spending and social protection measures for Africa's populations have not been of paramount concern to governments on the continent. Women, as the more vulnerable population on the continent, bear the brunt of this new reality. The COVID-19 pandemic presented a unique opportunity for Africa's governments to change its trajectory with respect to its economic policy-making approaches and to begin to demonstrate a fundamental concern with addressing the gendered inequalities that are endemic on the continent. The nature of the containment and mitigation measures introduced to address the pandemic provide a window into an assessment of African governments' performance in this regard. Across the continent, as Tsikata and Torvikey (2021) point out, the containment and mitigation measures were fairly similar. Containment measures

included hand hygiene, social distancing, and the use of personal protective equipment (PPE) in public; lockdowns of different time frames, as well as school and border closures. Mitigation measures have been of three kinds: access to basic services, social safety provisions, and financial support to businesses. A careful interrogation of these measures will provide insights into the extent to which African governments addressed the pandemic in a manner that also addressed gender inequalities in their societies.

In the health sector, there is a clear gender difference in mortality rates. The ratio of men to women dying after contracting COVID-19 was 1,1 in Angola, 1,3 in Kenya, and 1,5 in Sudan (Global Health 5050, 2021). A similar pattern has been observed in other countries as well (Ramirez-Soto *et al.*, 2021; Undurraga *et al.*, 2021). In both the public health and informal healthcare system, there is also a clear gender difference in who sustains these two systems. Around the world, health workers are disproportionately female, constituting 70% of the workforce (Pozzan and Cattaneo, 2020). Women are thus the ones most likely to be on the frontlines battling the pandemic and at increased risk of being infected due to lack of PPE adapted to female bodies (Smith *et al.*, 2021).

At home as well, women bear the brunt of the responsibility of the unpaid care work necessary for the reproduction of society. While women spend an average of four hours and 25 minutes a day engaged in unpaid care work globally, men spend the equivalent of one hour and 23 minutes (Pozzan and Cattaneo, 2020). With the temporary closure of schools and/or the introduction of remote learning associated with the pandemic, as well as the increase in the number of household members stuck at home because of stay-at-home orders, the care responsibilities of women have increased even further (Madgavkar *et al.*, 2020). Drawing on the language of "working a second shift", which Hochschild and Machung (2012) used to describe women's extra burden of reproductive work in the home, Chung (2020) has also alluded to the fact that women are engaged in "a third shift". She describes the work involved in this third shift as "ensuring the emotional wellbeing of not only…children but also parents and other family members. In other words, they are in charge of the mental load of worrying about the family." Once again, women are the ones saddled with the responsibility of easing the stress that family members are enduring as we all strive to cope with the numerous changes associated with the pandemic.

In the economic sector, gender differences in the impact of the pandemic have also come to light. Most studies focus on increased unemployment due to closure of workplaces in the formal sector. However, evidence has begun to emerge from countries with high levels of informal employment and predominance of micro- and small businesses as well. Based on a study of informal workers in 12 cities across the world including Accra, Dakar, Dar es Salaam, and Durban, conducted by the Women in Informal Employment: Globalizing and Organizing network, Ogando *et al*. (2021: 26) conclude that, "among men that reported increased unpaid care work, the differences between pre-COVID earnings and earnings between April and June 2020 were marginal. Among women, however, there is a clear association between an increase in care work and lower earnings." Azcona *et al*. (2020) predicted that, for every 100 men living in poverty globally, there would be 118 women. Ogando *et al*. (2021) are of the view that these gender differences will persist even as the full economic impact of the pandemic is felt in the years ahead, and that women, particularly those in the productive age in Sub-Saharan Africa and South Asia, will be the hardest hit.

While the evidence shows that existing inequities have been exacerbated by the pandemic, often in the form of intersecting inequalities that aggravate the fallout differently among women and other marginalised groups (Al-Ali, 2020; Kabeer *et al*., 2021), less attention has been paid to the role of the state in addressing these inequalities, not just in the short term, but more fundamentally. This paper takes the gender analysis of the COVID-19 pandemic further by examining the gendered ramifications of the containment and mitigation measures adopted by two countries on the continent. Data were collected from secondary sources, such as newspaper articles, televised news, government reports, and research reports, as the pandemic evolved between May 2020 and December 2020, and governments designed and implemented new measures to deal with the outbreak. In analysing data from two neighbouring countries in West Africa, Burkina Faso and Ghana, we are making two points in this paper. First, we argue that the ripple effects of the containment measures in particular were gendered. Second, in the mitigation measures adopted to soften the impact of containment, the gendered nature of the state is evident in the nature of the policies adopted. In the choices of which social or economic sector to support and which not to support, the male-centric nature of the state is made evident. As a result, policies disadvantage women, and even more so poorer women.

The paper proceeds as follows. In the next section, the rationale for choosing these two countries and the context in these two countries is laid out. This is followed by a gender analysis of the containment measures adopted by both countries, then a section outlining the gender inadequacies of the mitigation measures adopted by both countries. We return to the implications of these gender blind spots in the concluding section of the paper.

Context

The major reason for choosing Burkina Faso and Ghana as our comparative units of analysis was that both countries were due to hold elections in 2020, the first year of the pandemic: Burkina Faso on 22 November and Ghana on 7 December. The immediacy of the elections and the potency of winning votes by getting COVID-19 responses right meant that political leaders had to tread more cautiously in the choices they made in response to the pandemic. In other words, while all countries on the continent sought to offer their citizens as favourable a welfare system as they could manage, given the extent of the crisis, countries like Burkina Faso and Ghana, which had impending elections, had a heightened responsibility to do so.

Burkina Faso and Ghana are neighbours in the West African sub-region, with Burkina Faso located to the north of Ghana. Although Ghana is considered a lower-middle-income country and Burkina Faso a low-income country, their economies are not significantly different. In both countries, the economies are largely informal, with only a minority of the working population in waged employment. In the rural areas, the majority of the population work in agriculture, producing largely food crops for household consumption, with the excess put on the market for sale. The International Labour Organization's (ILO) data from 2017 shows that the share of the labour force working in agriculture in Burkina Faso is 27,1% (as cited in Martin *et al.*, 2021). Agriculture is largely rain-fed and, being in the Sahel zone, rainfall patterns can be erratic, making it difficult to earn a decent income in the agricultural sector. The main agricultural export is cotton. According to the Burkinabe National Gender Policy, food production is largely the preserve of women, with 75% of the food produced for household consumption in the country being produced by women (JICA, 2013). Women are largely absent in the production of the export crop.

Ghana is as agrarian as Burkina Faso, with 28,4% of its labour force working in agriculture, according to the ILO's data from 2017 (as cited in Martin *et al*., 2021: 30). While Ghanaian agriculture is also largely rain-fed, the country's geographic location makes it less susceptible to poor rainfall patterns compared to its northern neighbour, Burkina Faso. Nonetheless, food crop farmers in Ghana are among the poorest groups in the country. In Ghana, the main agricultural export is cocoa. Half of the food produced for household consumption in Ghana is produced by women (Duncan, 2004). As in the case of Burkina Faso, fewer Ghanaian women are involved in the production of the major export crop.

The political contexts in Ghana and Burkina Faso are quite different. Unlike Burkina Faso, which has held only two democratic elections over the last 30 years, Ghana has held eight fairly peaceful democratic elections over the last three decades and earned itself the moniker of a beacon of democracy on the African continent (Obeng-Akrofi, 2020). On the economic front, the two countries are quite far apart. With a GDP per capita of US$857.93 as at 2020 (The World Bank, 2020a), Burkina Faso is considered a low-income country. Ghana, on the other hand, had a per capita GDP of US$2,205.53 in 2020 (The World Bank, 2020b) and is considered a lower- middle-income country. The differences in life chances are evident on the Human Development Index (HDI) rankings as well. Burkina Faso's HDI stood at 0,452 as at 2019, positioning it at 182 out of 189 countries and territories (UNDP, 2020a: 243). In the same year, Ghana's HDI stood at 0,611, positioning it at 138 out of 189 countries and territories (UNDP, 2020a: 243).

One marker of women's status in a country can be determined using the Gender Inequality Index (GII). Introduced in the 2010 Human Development Report, the GII measures three dimensions of gender-based inequality: reproductive health, empowerment, and economic activity. Reproductive health is measured by maternal mortality and adolescent birth rates; empowerment is measured by the share of parliamentary seats held by women, and attainment in secondary and higher education by each gender; and economic activity is measured by the labour market participation rate for women and men. The higher a country's GII value, the higher the inequality between women and men in terms of human development. Here again, the difference between Burkina Faso and Ghana is evident, although not as starkly as the economic differences. Based on data from the 2019 index, Burkina Faso has a GII value of 0,594. Only 13,4% of parliamentary seats are held by women in Burkina Faso. Twice as many men as women have completed secondary

school education in Burkina Faso – 6,1% of women versus 12,3% of men. Maternal mortality rates are quite high; for every 100,000 live births, 320 women die from pregnancy-related causes. Similarly, there is a fairly high adolescent birth rate; it stands at 104,3 births per 1,000 women aged between 15 and 19. Finally, female participation in the labour market is 58,3% compared to 74,8% for men (UNDP, 2020b). On the face of it, Ghana does better than Burkina Faso on this measure. Its GII value is 0,538. Adolescent birth rates stand at 66,6 births per 1,000 women aged between 15 and 19 (UNDP, 2020c). In terms of secondary school completion rates, the male to female ratio is 1,3 i.e., 8,7% of women versus 11,7% of men (UNICEF, 2021). The labour force participation rate is 63,6% for females compared to 71,9% for males (UNDP, 2020c). However, on other measures, the difference is small. The maternal mortality rate is not that different from Burkina Faso. For every 100,000 live births, 308 women die (UNDP, 2020c). With respect to the share of parliamentary seats held by women, Burkina Faso actually does slightly better than Ghana. As of 2019, 13,1% of these seats were held by women (Bauer and Darkwah, 2020: 105).

Yet another important marker of difference between Burkina Faso and Ghana that cannot be ignored in this discussion is the insecurity in Burkina Faso arising from terrorist attacks. Since 2015, the nation has been battling Islamist militants who, every so often, attack soldiers and civilians alike (Wilkins, 2021). This has led to a large number of internally displaced persons. In 2020, there were as many as 848,000 internally displaced persons in Burkina Faso, and more than four-fifths (84%) were women and children (Wayack Pambè, Thorsen and Darkwah 2021: 16).

Prior to the pandemic, both countries were dealing with crises of different sorts. Working conditions were largely precarious, with only 12,7% of workers in Burkina Faso and 29,9% of Ghanaian workers engaged in jobs with formal contracts (Martin *et al.*, 2021: 13). In addition, only a third of Ghanaian workers were entitled to a pension. This was far better than the case in Burkina Faso where only 2,7% of its workers were entitled to a pension (Martin et *al.*, 2021: 13). In addition, as detailed in the OXFAM 2021 report (Martin *et al.*, 2021), the majority of the populations in both countries did not have access to universal healthcare (60% in Burkina Faso and 53% in Ghana).

This, then, was the prevailing context in 2020 when COVID-19 hit both countries. Burkina Faso identified its first case of Coronavirus on 9 March 2020, with Ghana following shortly thereafter on 12 March. The virus has spread quite differently in the two countries though. There are far more cases in Ghana than

there are in Burkina Faso. Data from the World Health Organization indicates that on 15 October 2020, roughly six months after the first cases were identified in both countries, Burkina Faso had a total of 2,294 confirmed cases (109,7 cases per 100,000 persons) while Ghana had had a much higher total of 47,126 confirmed cases (1516.6 cases per 100,000 persons). Ghana experienced its first peak of COVID-19 in July/August 2020 and a second peak in January/February 2021, while Burkina Faso experienced its first peak much later on, in December 2020. Even then, by April 2021 the total number of confirmed cases in Burkina Faso had only risen to 13,114, while Ghana had recorded seven times more confirmed cases, with a total of 91,663 cases (WHO, 2020a; WHO, 2020b). Given the rather large disparity in cases and the different timelines, the nature of containment measures in the two countries differed quite a bit. Nonetheless, in both countries, as will be described more fully in the next two sections, the governments responded rather swiftly to the identification of the virus outbreak, first with a series of containment measures and eventually mitigation measures as well.

Containment Measures

Many of the early containment measures drew on a biomedical disease model and focused on measures to contain the pathogen and prevent its spread. This was particularly important given that the existing healthcare infrastructure in both countries could not contain massive numbers of people requiring hospitalisation as was the case in Europe and North America. Burkina Faso's healthcare infrastructure was worse than Ghana's. In 2018, Burkina Faso had one doctor to 12,000 persons and one nurse to 2,419 persons (INSD, 2015). Ghana fared better but its situation was no less dire. In 2017, it had one doctor to 8,431 persons and one nurse to 627 persons (Ghana Health Service, 2017). These statistics mask locational differences. In both countries, rural populations have less access to healthcare personnel than urban populations do.

Both countries sought to put in place public health measures to test, trace, and contain the spread of the virus. Burkina Faso's public health provision was far more low-key than that of Ghana. One hospital centre in a suburb of Ouagadougou was set aside as the centre at which COVID-19 patients would be isolated. Testing kits were made available, but they were too few to combat a full-blown pandemic. Al Jazeera reported that, a couple of days after Burkina Faso had identified its first case, only 400 COVID testing kits were available and only three health centres

across the entire country were able to carry out the requisite tests (Wilkins, 2020). Eventually, regional donors such as the Economic Community of West African States (ECOWAS) and the West African Monetary and Economic Union (UEMOA), as well as other international donors, including the World Health Organization, the Republic of China, Plan International, and Doctors Without Borders, provided funding through the National Health Emergency Response Operations Centre (CORUS) to set up more laboratories that could test for the virus and to supply PPE to healthcare professionals (Bill and Melinda Gates Foundation, 2021).

The Ghanaian government, in partnership with the private sector and international donors, rolled out a more comprehensive set of public health measures. Testing was initially available at the Noguchi Memorial Institute for Medical Research, the Kumasi Centre for Collaborative Research, and the Public Health Reference Laboratory at the Korle-Bu Teaching Hospital. Over time, a network of private facilities set up testing centres in, particularly, the Greater Accra Region where the largest number of cases were identified. The private sector was also instrumental in the creation of isolation centres for COVID-19 patients. While initially a section of one hospital was set aside for COVID-19 patients, a group of ten Ghanaian businessmen and women set up a private sector fund (ghanacovid19fund.com) which aimed to raise GHC100,000,000 (approximately US$15,500,000) to pursue its mission which was "To provide a prompt response to the hardship and suffering arising out of the COVID-19 pandemic". A major goal of the fund was to construct a 100-bed Infectious Disease and Isolation Centre as well as a 21-bed intensive care unit and a biomedical laboratory at the Ga East Municipal Hospital. The fund delivered on its promise and the centre, built over a 100-day period, was inaugurated by the Vice President of the Republic of Ghana on 25 July 2020 (My Joy Online, 2020).

A major goal of the Ghanaian government in its roll out of public health measures to address the pandemic focused on increasing the medical staff to population ratio. A total of 65,000 health professionals (Ghana Web, 2020a), mostly previously unemployed nurses, were recruited to improve the healthcare-worker-to-patient ratio. These included community health nurses who were employed for contact tracing purposes. To ensure consistency and quality in the healthcare services, 7,000 healthcare workers were designated as frontline workers, who were likely to come into contact with the COVID-19 patients (Petetsi, 2020). Acknowledging the heightened risk of contamination, these frontline workers were offered incentives, such as insurance coverage for all of them, tax exemptions first for three months

and then another three, amounting to a total cost to the state of GHC174,000,000 (approximately US$30,000,000) (Ghana Web, 2020b) as well as a 50% increase in basic salary for any frontline worker who came into contact with a COVID-19 patient.

Beyond the public health measures, both countries instituted a series of proactive containment measures, by decree and emergency policy decision-making. These included almost immediate closures of the air, sea and land borders. Ghana's air borders were reopened on 1 September 2020 (Laudbusiness.com, 2020) while its land and sea borders remain closed (CNN Travel, 2021). Similarly, Burkina Faso closed all external borders. As with Ghana, the land borders in Burkina Faso and indeed across the West African subregion officially remained closed until 1 January 2022 (Okafor, 2021). Schools were also closed, with Ghana closing the schools on 16 March 2020 (BBC News | Pidgin, 2020), four days after the first case was identified, and Burkina Faso closing schools on 15 March 2020, six days after its first case. However, while Burkina Faso reopened its schools in October 2020 (ACAPS, 2021), Ghana did not reopen its schools until January 2021 (BBC News | Pidgin, 2021). The only exception in both countries was for final year students at both junior and senior high school level who were allowed to return to school to finish their secondary school completion examinations in June 2020. In Burkina Faso, the school closures compounded a pre-existing problem: the situation where schools had been closed because of the Islamic terrorists. Finally, COVID-19 containment prompted partial lockdowns in both countries. In Ghana, stay-at-home orders were imposed for three weeks (from 27 March to 19 April 2020) but only in the capital city of Accra and its environs of Tema and Kasoa as well as Kumasi, the second largest city in the country (Crisis24, 2020a). In Burkina Faso, a nationwide curfew from 7pm to 5am was imposed on 21 March 2020, and cities with confirmed cases of COVID-19 were quarantined from 26 March 2020 by banning the movement of people in and out of these cities (SIG, 2021). Additionally, markets were ordered to close from 26 March to 19 April 2020. The night curfew lasted ten weeks but, from 20 April to 2 June 2020, the time period for the curfew was readjusted to between 9pm and 4am (Crisis24, 2020b), just in time for Ramadan.

Another containment measure that both countries adopted drew inspiration from the WHO recommendations for increased attention to hygiene, distancing, and face masks. Both countries began a near immediate campaign for handwashing which was supported by innovations in handwashing facilities in both countries. By April 2020, Burkina Faso had mandated the wearing of face masks in public

spaces. In Ghana, the state went as far as enacting a law, E.I. 164 No 10, which was signed and gazetted on 15 June 2020. E.I. 164 mandated the wearing of face coverings, be it masks or shields, for individuals in public spaces. The penalty for failing to comply with this law is a fine of not less than GHC12,000 (US$2,000) and not more than GHC60,000 (US$10,000) and/ or imprisonment of not less than four years and not more than 10 years (Hawkson, 2020).

Gender Blind Spots in The Containment Measures

In line with Smith's (2019) observations of global outbreak responses being focused primarily on biomedical needs, early COVID-19 responses and policies in Burkina Faso and Ghana did not consider the potential ramifications of these measures on different population groups. However, on the African continent, regional cross-border trade is a quintessential female activity, particularly when orientated towards food and low-value goods for retail and small-scale wholesale trade (Mbo'o-Tchouawou *et al.*, 2016). Koroma *et al.* (2017: 1) estimate that 70% of informal cross-border traders on the continent are women. Thus, in Burkina Faso and Ghana, the immediate closure of borders disproportionately affected women, whose trading activities involve their presence as buyers, during transport, and at selling points. While some may avoid trading altogether, others continue the trade clandestinely, but have to contend with the increased bribery and harassment from border officials. The continued closure of land borders is a drain on the finances of these women, be they Burkinabe or Ghanaian, and has thus eroded the viability of their businesses. In Ghana, protests have been held at both the Ghana-Togo (Crisis24, 2021) and Ghana-Côte d'Ivoire borders (AFP News, 2021) to no avail. The governments' disregard for the impact of these new trade barriers on female traders contradicts the economic importance of this trade elsewhere in West Africa; a study carried out by UN Women notes that in Benin, Chad and Mali, women's informal cross-border trade generated 40% to 60% of the value added in trade to the GDP in the 2000s (Doss *et al.*, 2020: 45).

Analysing the gendered effects of the partial lockdown and market closures reveals that, again, women were disproportionately affected, and especially those who make a living from trade in foodstuffs or consumer items or from casual porter work in marketplaces. During the lockdown and closure period, these women could not sell their goods and had to contend with spoilage as well. Casual workers lost access to work. For many of these women, who rely on daily sales and small jobs to eke out a living, the temporary closures of the markets were a real financial burden,

as it meant the loss of daily income. Their vulnerability was, perhaps, most starkly evident in the story of a number of head porters from northern Ghana who, on the night the lockdown was announced, attempted to travel back home due to their inability to afford accommodation and meals if they had to stay in Accra for three weeks without working (Kotoka, 2020). In Burkina Faso, the association of market traders mobilised demonstrations against the market closures and pressured the authorities to reopen markets earlier than planned (Kabore, 2020). This difference in citizens' leverage against authorities is likely to be linked with the relative power of authorities and with concerns about pleasing powerful constituents ahead of the elections. The Burkinabe government was already under much pressure in 2020 compared to the incumbent president of Ghana. However, for the women running micro- and small businesses, market closures were not the only impediment. As mentioned earlier, they shouldered additional work in the second shift as well as the third shift, which further eroded their ability to maintain their trading activities.

Finally, we examine the gendered impact of the long period of school closures and its potential impact on girls' education, although the full impact of this is only going to be fully appreciated in the long term. Globally, concerns have been raised over increasing rates of girls dropping out of school due to child marriage or teenage pregnancy. World Vision International predicts that as many as one million girls in Sub-Saharan Africa may lose their chance to complete school as a result of the lockdowns (World Vision Ghana, 2020) and, one might add, the extended school closures. In Burkina Faso, girls' education is already devalued, with only 6,1% of women having completed secondary school education. Moreover, the incidence of child marriage is very high and has stayed fairly stagnant over the last two decades (Fatusi *et al.*, 2021). Prior to the pandemic, 51,3% of young women aged 20–24 years in 2014 were married by the age of 18 and the rate was even higher in rural areas (Wayack Pambè *et al.*, 2021: 25). However, the evidence from Burkina Faso and Ghana so far does not point to an increase in child marriages as a result of the pandemic. The issue of teenage pregnancies during school closures is linked with concerns about girls having far more contact with boys and men in unsupervised contexts than would have been the case if they were in school; this is believed to increase their risk of engaging in unsafe sexual practices. Early evidence from Ghana suggests that these predictions are not true. The teen pregnancy rate figure has hovered around 11% over the last five years, with no statistically significant change in 2021 (Citi Newsroom, 2021). The bigger issue, we argue, is not tied to marriage

and sex, as implied by international donors, but rather to schooling not being perceived as a valuable option for all girls; this may affect girls' return to education after lengthy closures in the same numbers as they were prior to the pandemic.

Mitigation Measures

The variety of containment measures adopted in both Burkina Faso and Ghana had nationwide fallouts. Gallup's worldwide poll of one thousand individuals in each country found that, in Burkina Faso, 71% of workers stopped working temporarily while in Ghana, the equivalent figure was 60% (Ray, 2021). Prior to COVID-19, the income GINI coefficient based on the latest household surveys stood at 0.435 for Ghana and 0.353 for Burkina Faso (Martin *et al.*, 2021: 8). Another measure of inequality, the Palma Ratio, also demonstrates the higher level of inequality in Ghana as opposed to Burkina Faso. The Palma Ratio, which measures the ratio of the richest ten per cent of the population's share of national income divided by the poorest 40%'s share stood at 2.25 for Ghana and 1.48 for Burkina Faso (Martin *et al.*, 2021: 8). All major international organisations, such as the United Nations, the International Monetary Fund, and the World Bank, predict that the pandemic will worsen both inequality and poverty. In fact, the World Bank predicts that 51 million more people in Sub-Saharan Africa will be driven into extreme poverty as a result of the pandemic (Lakner *et al.*, 2021). In 2030, Kharas and Dooley (2021: 5) estimate that nine of the ten countries with the largest numbers of individuals living in extreme poverty as a result of the pandemic will be found on the African continent. Burkina Faso will be one of these nine, with an estimated 2,3 million more of its peoples living in extreme poverty.

At the national level, the price of food and consumer goods increased in both countries and, given that a large segment of the population experienced a decrease in income during this period, this had an adverse impact on food consumption. In Ghana, for example, 77,7% of the population faced lower incomes and just over half the population reduced their food consumption (GSS, 2020a). In Burkina Faso, the economic fallout of the pandemic, coupled with the insurgency, led to a situation where nearly five per cent of the population (954,000 persons) needed nutritional assistance (Wayack Pambè *et al.*, 2021: 16). A quarter of Burkinabe respondents who participated in the RECOVR survey had also either reduced their portion sizes or skipped a meal in the week prior to participating in the survey (Warren *et al.*, 2020).

Given the widespread negative short-term impact of the pandemic, it was imperative that governments adopt a range of mitigation measures to cushion its impact on their citizens. These mitigation measures focused on three areas, namely, subventions to ease the immediate financial burdens of citizens, measures to address schooling deficits, and assistance to businesses.

The subventions provided to ease the financial burdens that the pandemic had wrought were fairly similar across both countries. It comprised mostly water and electricity subsidies as well as cash transfers. The Ghanaian government subsidised the provision of electricity from April 2020 to the end of September 2020, while water was provided free till the end of December 2020. Given that many more households have access to electricity than to water, the majority of the Ghanaian population enjoyed the electricity subvention and not the water subvention; 75% compared to 22% of the population (GSS, 2020b: 1). Similarly, the government of Burkina Faso introduced subsidies for water and electricity, but only for three months. In contrast to Ghana, the subsidy was means-based; low consumption households were exempted from paying bills for three months, while the medium consumption households were offered a 50% rebate on their bills. However, as with Ghana, there was poor access. In the Burkinabe case, as many as 93.5% of households in urban areas had access to pipe-borne water in their houses, compounds or nearby communal taps (Dos Santos and Wayack Pambè, 2016). However, water supply to these taps was erratic, especially during the dry season months of March to June, which coincided with the period when the subsidy was being offered. Poor supply of pipe-borne water meant that the subsidy was of little benefit to most people. Neither was an attempt made to distribute water in the communities where pipe-borne water was not available

In both Burkina Faso and Ghana, cash transfer programmes were delivered on a means-based basis prior to the pandemic. The Burkina Naong-Sa Ya programme (end of misery in Burkina Faso) has been in existence since 2014. It provides a monthly cash transfer of around 10,000 Fcfa (US$17) to roughly 20,000 beneficiaries. In the months of May, June and July 2020, the programme doubled the number of beneficiaries (Wayack Pambè *et al.*, 2021: 22). Similarly, Ghana's Livelihood Empowerment Against Poverty (LEAP) programme, which has run since 2018, targets a wide range of vulnerable individuals including poor and destitute families; guardians of orphaned and vulnerable children; persons with severe disability; destitute pregnant women; and elderly persons over 65 years of age. Although the

programme has run for a shorter time than in Burkina Faso, it targets many more people – 332,000 households across the country. However, the monthly amounts transferred are rather small, ranging from GHC32 per person to GHC106 per a family of four or more (US$5,30 to US$17,80) (Ghana News Agency, 2020). During the pandemic, efforts were made to pay the monies, which had been doubled, in advance instead of in arrears. so as to offset the rising cost of living associated with the pandemic. Beneficiaries were also paid an additional sum of GHC10 (US$1,75) to enable them to purchase PPE. Finally, transfers were made using a digital platform to ease access and maintain health safety during the pandemic. However, given the digital divide in Ghana, where only 34% of women, compared to 44% of men, had mobile accounts in 2017, this new payment system would have disadvantaged female recipients (Dadzie and Raju, 2020).

The swift closure of schools left absolutely no time for planning for educational continuity for the school-aged population. Burkina Faso's Ministry of National Education, Literacy and Promotion of National Languages was only able to put together a response plan one month after schools were closed. This action plan hinged rather ambitiously on the production of digital teaching resources which were going to be made available to students through both traditional and new media sources. Similarly, Ghana's Ministry of Education and Ghana Education Service focused on the creation of educational content which was going to be made available in 30 minutes of repeated segments on both television and radio.

Finally, mitigation measures were designed to soften the fallout of containment measures on small- and medium-sized enterprises (SMEs). The Burkinabe government issued an array of fiscal measures to support businesses. This included waiving the collection of various taxes and the suspension or remission of penalties. In addition, the government bore the operating costs of the markets, secured stocks of consumer goods (sugar, milk, rice, oil, soap, etc.) and tightened price controls throughout the country to ensure that goods remained affordable in the midst of the pandemic. The government also announced a business support scheme, the *Fonds de relance économique* (FRE-COVID-19) of 100 billion FCFA (roughly US$200 million) in April 2020. However, unlike Ghana, where the business support scheme was rolled out pretty quickly, it took six months in the Burkinabe case for the details of the fund to be made public (Mano, 2020). As with Ghana's Coronavirus Alleviation Programme Business Support Scheme (CAP BuSS), discussed below, the FRE-COVID-19 scheme in Burkina only supports businesses that are formally

registered, a rule that disadvantages informal business owners who, in Burkina Faso, as in Ghana, comprise the majority of female workers. Ghana developed two schemes. First was the CAP BuSS which was funded by both the state and partner banks to the tune of GHC1 billion (approximately US$150 million) (Gold Street Business, 2020). This aimed to support SMEs through loan schemes with a one-year moratorium and a two-year reimbursement period. The second scheme was the Coronavirus Alleviation and Revitalisation of Enterprises Support (CARES) which was focused on building back after the pandemic. There are two parts to the programme: a stabilisation programme that was to run until December 2020 and a revitalisation project that is to last through 2023. The revitalisation project is designed to engender structural transformation in Ghana's economy, including the promotion of the local agri-food systems. This component focuses on four areas: supporting commercial farming, attracting educated youth into the agricultural sector, developing and promoting agro- and food processing, and finally, optimising the sector's flagship programmes, which are Planting for Food and Jobs, and Rearing for Food and Jobs. Five products are given particular attention: rice, poultry, cassava, sugar, and tomatoes. These are all imported in huge amounts. No specific measures were designed to revitalise existing small-scale businesses specialising in small-scale processing and local markets, of which the majority are run by women.

Overall, in the development of these mitigation measures, governments worked with very broad and inclusive definitions of which categories of individuals were deemed vulnerable. As a result, the measures ended up not always supporting those most in need. Other policies designed to address the economic fallout of the containment measures inadvertently disadvantaged women because they focused on a segment of the working population that was disproportionately male.

Gender Blind Spots in Mitigation Measures

As has been previously mentioned, financial subsidies were created in order to ease the costs that ordinary people had to bear due to the imposition of stay-at-home orders and the demands for increased hygiene. A scrutiny of the effect of those costs shows that there were clear differences in who had access to both the electricity and water subventions. Gender, wealth, and location came into play. In Ghana, male-headed households in the South were far more likely to afford housing with piped water and appliances using electricity than female-headed households in the northern part of Ghana (Oduro and Tsikata, 2020). A similar picture emerged in

Burkina Faso, where only 9,2% of female-headed households had access to electricity in 2016 compared to 42,6% of male-headed households. The lack of electrification in rural areas resulted in significant inequality, with only 27,7% of rural households having access to electricity compared to 75,3% of urban households (MINEFID, 2017). Although household wealth depends on the number of economically active persons and the pooling or non-pooling arrangements, the differences in wealth must be seen in light of the type of employment and self-employment men and women have respectively, and of earning potential in different regions of the country. Infrastructural problems also meant that Burkinabe women and girls, particularly those living in the rural parts of the country, continued to be saddled with the burden and drudgery of procuring water for their households even as pipe-borne water was made available to the elite in urban households for free.

It is clear, from close interrogation of the measures designed to mitigate the educational implications of school closures, that little attention was paid to gender. As already discussed, the evidence so far does not point to a decrease in girls' attendance at school due to either teen pregnancy or child marriage. In terms of performance, however, gendered educational outcomes are likely to be seen far into the future. While many countries, including Ghana and Burkina Faso, sought to minimise the negative impact of school closures by offering alternatives on either radio or the internet, several factors intersected to expand the educational gap further and wider in both countries. Rural children were at a disadvantage with regard to access to electricity and the required appliances for remote learning. Poverty further aggravated this inequality, implying that children in poor households were even more unlikely to access remote learning if the household head was female than if the head was male. Previous experience shows that girls who are at home are burdened with house chores and care work (Acosta and Evans, 2020). Their ability to devote full attention to their schoolwork is diminished, and more so for girls living in households with intermittent access to water and labour-saving appliances. This has implications for how well they will do in school in the long term, the data for which does not yet exist.

The business support schemes implemented by both governments reveal significant gender differences. This is as true in Burkina Faso as it is in Ghana. In Ghana, the CAP BuSS programme was initially criticised for its inattention to gender differences in the population of business owners and their requisite needs for support. Oduro and Tsikata (2020: 37) pointed to the fact that some of the eligibility criteria

undermined the extent to which this programme could be favourable to women's businesses. First, self-employed business owners without employees were not eligible for the loans. Far more women (55,7%) than men (42.4%) are in this category of employment (Tsikata and Darkwah, 2019: 122) and are thus automatically cut off from the scheme. Secondly, applicants need to demonstrate the vulnerability of their business by opening up their books to the government agency disbursing the funds. This is a tall order for the majority of Ghanaian women business owners who are simply eking out a living and do not have the technical know-how or finances to pay for the services of an accountant or bookkeeper to help them with their records. The same critiques can be raised of business-oriented mitigation measures issued in Burkina Faso, where most fiscal measures were unlikely to benefit informal traders. Despite the negligible attention to female traders in the policy design, the implementation was more gender responsive, at least in Ghana. The disbursers of the CAP BuSS fund made a great effort to ensure that women business owners were able to access the loans. As at the end of December 2020, approximately GHC412,88 million had been disbursed to support 277,511 businesses. Sixty-nine per cent of the beneficiaries were female (GoG, 2021: 77). This is especially important, given the rather high levels of Ghanaian female entrepreneurship. In 2020, the Mastercard Index of Women Entrepreneurs ranked the Ghanaian economy as one of three with the leading number of women entrepreneurs (Mastercard, 2021). The effect of recovery measures is not yet documented. However, a critical evaluation of the revitalisation component of the Ghana CARES programme exposes a gender-blind design. The revitalisation programme focuses on commercial large-scale farming and the industrialised high-end processing component of the agricultural value chain, with no attention to the distribution end of the agri-food value chain. In a country where nearly 30% (29.1%) of women compared to seven per cent of men work as market traders (Baah-Boateng and Vanek, 2020), it is dismaying that female small-scale traders, who are the ones largely responsible for the distribution of agro-food products, have not been targeted specifically in the strategies for building back better.

A glaring blind spot in the mitigation measures of both the Burkinabe and Ghanaian governments was the complete silence on domestic violence. Much of the attention focused on economic vulnerability and educational fallouts without adequate attention to domestic violence. Even though Ghana and Burkina Faso do not have large statistical evidence of their own, there has been documentation

of the increase in domestic violence in other parts of the world (Hsu and Henke, 2021), leading Evans *et al.* (2020: 2302) to call it "a pandemic within a pandemic." There is no reason why we should expect a different story in Ghana or Burkina Faso. The small sample surveys and qualitative evidence in both places also point to an increase in domestic violence. In a study of 187 Burkinabe women, Dalla and Snorek (2020: 18) noted that there was an increase in the rate of gender-based violence from 10,16% to 15,51% after the pandemic.

In Ghana, interviews with a number of non-state actors involved in Sexual and Gender-Based Violence (SGBV) work pointed to the reality of being locked down with one's abuser during the three-week lockdown in the Greater Accra Region. Interviews conducted by FIDA/OSIWA Ghana (2020: 21) revealed the inadequacies of the containment measures that made no room for operating protection services for survivors of violence during the lockdowns. Social workers from organisations working with SGBV were not considered essential or critical workers and were thus not exempted from the lockdowns. In fact, the Ghanaian government made little to no effort to address domestic violence during the height of the pandemic. Instead, it was the United Nations Population Fund (UNFPA) that stepped up to the plate. In partnership with the Domestic Violence Victims Support Unit of the Ghana Police Service, they set up a hotline for survivors (UNFPA, 2020a). A telecommunications company, Vodafone Ghana, also provided support to the oldest shelter for women in Ghana, the Ark Foundation. They refurbished part of the Foundation's facilities so it could serve as a first point of contact and isolation for survivors with COVID prior to resettlement at the shelter (Ampomah, 2020). Similarly, in Burkina Faso, the government had been completely silent on domestic violence matters (Wayack Pambè *et al.*, 2021: 26). Just as in the Ghanaian case, the UNFPA rose to the challenge. Already working on these matters due to the conflict and insecurity in Burkina Faso over the last seven years, this institution increased its funding for gender-based violence programmes due to a fear that the night curfews imposed as part of the containment measures, and rising food prices in spite of the government's efforts to forestall that, would increase the risk of violence (UNFPA, 2020b).

Conclusion

This article explored the gendered impacts of the containment and mitigation measures adopted in two countries. While most studies have examined the broader impacts on paid and unpaid work, income levels, health, and education, our analysis centred on unpacking gendered outcomes among ordinary citizens of specific measures and how they intersected with wealth and regional inequalities. Although there was a preoccupation with biomedical needs, public health, and healthcare infrastructure early in the pandemic, the pandemic was not just a health crisis; it was also a socio-economic crisis. We focused on the social and economic effects of the proactive containment measures and subsequent mitigation policies because these laid bare the gender differentiation in our societies, highlighting the importance of the age-old arguments made for concerted efforts at gender equality and equity. Closures – from national borders, to markets and other workplaces, educational spaces, and social spaces outside homes – affected women disproportionately and long term. Instant changes to the burden of domestic chores and care work impacted women's immediate income with the worries and needs for planning that come along with managing. However, the extended closures of borders damaged trade networks, thus directly affecting the vast numbers of female traders involved in informal cross-border trade. The ripple effects of the reduced movements of goods along the trading networks struck the many women eking out a living from small-scale retail sale in local markets. For children and young people in education, school closures instantly gave them time on their hands to take on work at home and/or to spend on social activities when not restricted by lockdowns or curfews. While extended school closures eroded the academic progress of both boys and girls, they increased risk for girls of perpetuating gender norms that do not favour education as a good option for girls.

In our case study countries, the failure to recognise that the fallout from rapid outbreak responses is gendered and happens in different tempos was further exacerbated in the design of mitigation measures. In spite of prior programmes to increase women's empowerment and participation, girls' schooling, and so forth, a gender-responsive approach was not applied to policy and programming. Measures to alleviate hardship immediately ignored existing inequalities, except for those targeting the most destitute. Thus, without paying attention to the many families living in poorer neighbourhoods in cities or in rural areas, subsidies to support stay-at-home orders pandered to urban voters and did little to relieve women of the

increased burden of domestic work or the effects of the instantaneous reduction in their income. Remote learning strategies to ensure continuity in education exacerbated the marginalisation of rural children, who could not access lessons, and put further at peril the girls whose place at school was not a given.

Neither country implemented measures targeted specifically at women or girls to preserve or ameliorate their economic and social positions. The attack on the advancement of gender equity goals is also evident in the business recovery plans. By focusing on the formalisation of businesses, businesses of a size large enough to create employment, and on the expansion of industrialised value chains, the parts of the economy occupied by female entrepreneurs and small-scale traders are neglected. The short-term nature of these measures, including, in the case of Ghana, the introduction of a bevy of taxes and price hikes, are unlikely to address the fundamental structural deficiencies in our economies that create gendered economic outcomes. In unpacking the gendered ramifications of mitigation and recovery policies, the male-centric nature of the state is highlighted and the need for an alternative approach to economic policy-making made more evident.

Acknowledgements

We acknowledge funding from INCLUDE, Netherlands, which supported the data collection that serves as the basis of the analysis in this paper.

References

Acosta, Amina M. and Evans, David. 2020. "COVID-19 and Girls' Education: What We Know So Far and What We Expect." *Center for Global Development*, 2 October. Available at https://www.cgdev.org/blog/covid-19-and-girls-education-what-we-know-so-far-and-what-we-expect-happen

ACAPS (Assessment Capacities Project). 2021. "COVID-19: Insecurity and education in Burkina Faso." Thematic series on education – October 2020. Geneva: ACAPS. Available at https://reliefweb.int/sites/reliefweb.int/files/resources/20201015_acaps_thematic_series_on_education_burkina_faso.pdf

AFP News. 2021. "Ghana traders protest closures as Covid measures bite." *Agence France-Press*, 2 September. Available at https://www.barrons.com/news/ghana-traders-protest-border-closures-as-covid-measures-bite-01630607408

Al-Ali, N. 2020. "Covid-19 and feminism in the Global South: Challenges, initiatives and dilemmas", European Journal of Women's Studies 27: 333–47.

Amnesty International. 2021. Amnesty International's Report 2020/2021 – Burkina Faso. Available at https://www.amnesty.org/fr/countries/africa/burkina-faso/

Ampomah, Eunice H. 2020. "Vodafone Provides Ark Foundation with Shelter for Domestic Violence Victims." *Ghana News Agency*, 9 October. Available at https://www.gna.org.gh/1.18929124

Azcona, Ginette et al. 2020. *From Insight to Action: Gender Equality in the Wake of COVID-19*. New York, NY: UN Women. Available at https://www.unwomen.org/sites/default/files/Headquarters/Attachments/Sections/Library/Publications/2020/Gender-equality-in-the-wake-of-COVID-19-en.pdf

Baah-Boateng, William and Vanek, Joann. 2020. "Informal Workers in Ghana: A Statistical Snapshot", *WIEGO Statistical Brief No. 21*. Manchester, UK: WIEGO.

Bauer, Gretchen and Darkwah, Akosua K. 2020. "We would rather be leaders than parliamentarians: women and political office in Ghana", *European Journal of Politics and Gender* 3 (1):101–119.

BBC News | Pidgin. 2020. "Coronavirus – Virus: Ghana schools closed, religious, sports activities chop ban to fight Covid-19 disease." *BBC*, 16 March. Available at https://www.bbc.com/pidgin/tori-51904164

BBC News | Pidgin. 2021. "Re-opening date for schools in Ghana: Students go back to classroom after 9 month Covid-19 shutdown - Dis be what you for know." *BBC*, 4 January. Available at https://www.bbc.com/pidgin/tori-55530001

Bill and Melinda Gates Foundation. 2021. *Committed Grants Database*. Available at https://www.gatesfoundation.org/How-We-Work/Quick-Links/Grants-Database/Grants/2018/11/OPP1199135

Chung, Heejung. 2020. "Return of the 1950s Housewife? How to Stop Coronavirus Lockdown Reinforcing Sexist Gender Roles." *The Conversation*, March 30. Available at https://theconversation.com/return-of-the-1950s-housewife-how-to-stop-coronavirus-lockdown-reinforcing-sexist-gender-roles-134851.

Citi Newsroom. 2021. "Teenage pregnancies in Ghana hit 555,575 in five years." *CNR*, 25 June. Available at https://citinewsroom.com/2021/06/teenage-pregnancies-in-ghana-hit-555575-in-five-years/

CNN Travel. 2022. "Travelling to Ghana during Covid-19: What you need to know before you go." *Cable News Network*, 1 March. Available at https://edition.cnn.com/travel/article/ghana-travel-covid-19/index.html

Crisis24. 2020a. "Ghana: Authorities impose lockdown on two regions due to COVID-19 from March 30 /update 3." *Crisis24*, 28 March. Available at https://crisis24.garda.com/insights-intelligence/intelligence/risk-alerts/979npwgshqgzxmjji/ghana-authorities-impose-lockdown-on-two-regions-due-to-covid-19-from-march-30-update-3

Crisis24. 2020b. "Burkina Faso: Authorities ease lockdown measures May 4 /update 7." *Crisis24*, 5 May. Available at https://crisis24.garda.com/insights-intelligence/intelligence/risk-alerts/ayjcpmtqx2ejpxpfb/burkina-faso-authorities-ease-lockdown-measures-may-4-update-7

Crisis24. 2021. "Ghana: Community to protest COVID-19-related border closure in Aflao, Volta Region, Aug. 27." *Crisis24*, 25 August. Available at https://crisis24.garda.com/insights-intelligence/intelligence/risk-alerts/wip1001313531/ghana-community-to-protest-covid-19-related-border-closure-in-aflao-volta-region-aug-27

Dalla, Ousmane and Snorek, Julie L. 2020. *Analyse rapide de l'impact de la pandémie liée au COVID-19 sur les violences faites aux femmes et aux filles au Sahel*. Bronx, NY: Justice and Dignity for the Women of Sahel.

Dadzie, Christabel E. and Dhushyanth, Raju. 2020. "Economic Relief Through Social Safety Nets During the Covid-19 Crisis: The Case of Ghana." *World Bank Blogs*, 26 October. Available at https://blogs.worldbank.org/nasikiliza/economic-relief-through-social-safety-nets-during-covid-19-crisis-case-ghana

Dos Santos, Stéphanie and Wayack Pambè, Madeleine. 2016. "Les Objectifs du Millénaire pour le développement, l'accès à l'eau et les rapports de genre", *Mondes en développement* 2: 63–78.

Doss, Cheryl et al. 2020. "The potential intersections of Covid-19, gender and food security in Africa", *Journal of Gender, Agriculture and Food Security* 5: 41–48.

Duncan, Beatrice A. 2004. *Women in Agriculture in Ghana*. Accra: Friedrich Ebert Foundation.

Evans, Megan L. et al. 2020. "A Pandemic Within a Pandemic – Intimate Partner Violence During Covid-19", *New England Journal of Medicine* 383 (24): 2302–2304.

Fatusi, Adesegun O. et al., 2021. "Trends and correlates of girl-child marriage in 11 West African countries: evidence from recent Demographic and Health Surveys", *AAS Open Research* 4: 35–35.

FIDA/OSIWA Ghana. 2020. *Women and Girls in Emergency (WAGE) during the COVID-19 lockdown in Ghana – Access to help for GBV victims*. Accra: International Federation of Women Lawyers and Open Society for West Africa.

Ghana Health Service (GHS). 2017. *The Health Sector in Ghana – Facts and Figures 2017*. Accra: Ghana Health Service. Available at https://thinknovate.org/wp-content/uploads/2019/03/FACTSFIGURES_2017.pdf

Ghana News Agency. 2020. "LEAP beneficiaries receive double payment to cushion them against corona virus pandemic." *GhanaWeb*, 23 June. Available at https://www.ghanaweb.com/GhanaHomePage/business/LEAP-beneficiaries-receive-double-payment-to-cushion-them-against-coronavirus-pandemic-988027

GhanaWeb. 2020a. "Coronavirus: We've recruited 65,000 new health personnel – Dr Bawumia." *GhanaWeb*, 25 July. Available at https://www.ghanaweb.com/GhanaHomePage/NewsArchive/Coronavirus-We-ve-recruited-65-000-new-health-personnel-Dr-Bawumia-1016506

GhanaWeb. 2020b. "Parliament approves GH¢174m tax-free income for front line health workers." *GhanaWeb*, 16 August. Available at https://www.ghanaweb.com/GhanaHomePage/business/Parliament-approves-GH-174m-tax-free-income-for-front-line-health-workers-1034014

Global Heath 5050. 2021. *The COVID-19 Sex-Disaggregated Data Tracker.* Available at https://globalhealth5050.org/the-sex-gender-and-covid-19-project/the-data-tracker/

Gold Street Business. 2020. "102,361 Applicants Benefit From GH¢1bn Stimulus Package." *GhanaWeb,* 10 August. Available at https://www.ghanaweb.com/GhanaHomePage/business/102-361-applicants-benefit-from-GH-1bn-stimulus-package-1029637

Government of Ghana. 2021. *The Budget Statement and Economic Policy of the Government of Ghana for the 2021 Financial Year*. Accra: Ministry of Finance.

GSS. 2020a. *Brief on COVID-19 Households and Jobs Tracker Wave 1*. Accra: Ghana Statistical Service.

GSS. 2020b. *Brief on COVID-19 Local Economies Tracker Wave 1*. Accra: Ghana Statistical Service.

Hawkson, Emmanuel E. 2020. Graphic Online. "Failing to wear face mask can land you 10 years in prison or Ghc 60,000 fine." Available at https://www.graphic.com.gh/news/general-news/failing-to-wear-face-mask-can-land-you-10-years-in-prison.html

Hochschild, Arlie R. and Machung, Anne. 2012. *The Second Shift: Working Families and The Revolution at Home*. New York, NY: Penguin Books.

Hsu, Lin-chi and Henke, Alexander. 2021. "The Effect of Sheltering in Place on Police Reports of Domestic Violence in the US", *Feminist Economics* 27 (1-2): 362–379.

INSD. 2015. *Enquête multisectorielle continue (EMC) 2014: Profil de pauvreté et d'inégalités*. Ouagadougou: Institut National de la Statistique et Démographie – Ministère de l'économieet des finances.

Japan International Cooperation Agency (JICA), 2013. *Country Gender Profile: Burkina Faso*. Available at https://www.jica.go.jp/english/our_work/thematic_issues/gender/background/c8h0vm0000anjqj6-att/burkinafaso_2013.pdf

Kabeer, Naila et al. 2021. "Feminist economic perspectives on the COVID-19 pandemic", *Feminist Economics* 27 (1-2): 1–29.

Kabore, Jules. 2020. "COVID-19 in Burkina Faso: Traders demand the opening of the Dassasgho market." *Burkina24*, 28 April. Available at https://www.burkina24.com/2020/04/28/covid-19-au-burkina-faso-des-commercants-reclament-louverture-du-marche-de-dassasgho/

Kharas, Homi and Dooley, Meagan. 2021. *Extreme Poverty in the Time of COVID-19*. Washington, DC: The Brookings Institution.

Koroma, Suffyan et al. 2017. *Formalization of informal trade in Africa: Trends, experiences and socio-economic impacts*. Accra: FAO.

Kotoka, Emmanuel. 2020. "Dr. Bawumia Gifts Stranded Head Porters (Kayayoos) GH¢500 Each." *Adepa News.com*, 1 April. Available at https://adepanews.com/dr-bawumia-gifts-stranded-head-porterskayayoos-gh%C2%A2500-each/

Lakner, Christoph et al. 2021. "Updated Estimates of The Impact of Covid-19 On Global Poverty: Looking Back At 2020 And the Outlook For 2021." *World Bank Blogs*, 11 January. Available at https://blogs.worldbank.org/opendata/updated-estimates-impact-covid-19-global-poverty-looking-back-2020-and-outlook-2021

Laudbusiness.com. 2020. "Coronavirus: Borders, beaches and pubs remain closed – Akufo-Addo." *GhanaWeb*, 16 August. Available at https://www.ghanaweb.com/GhanaHomePage/business/Coronavirus-Borders-beaches-and pubs-remain-closed-Akufo-Addo-1035343

Madgavkar, Anu et al. "2020. COVID-19 and gender equality: Countering the regressive effects." *McKinsey & Company*, 15 July. Available

at https://www.mckinsey.com/featured-insights/future-of-work/covid-19-and-gender-equality-countering-the-regressive-effects

Mano, Valentin. 2020. "FRE Covid-19: Comment bénéficier du fonds." *Bizya Africa*, 21 September. Available at: https://biznesskibaya.com/blog/2020/09/21/fre-covid-19-comment-beneficier-du-fonds/

Martin, Matthew et al. 2021. *The West Africa Inequality Crisis: Fighting Austerity and the Pandemic*. Oxfam GB: Oxfam International. Available at https://oxfamilibrary.openrepository.com/bitstream/handle/10546/621300/rr-west-africa-cri-austerity-pandemic-141021-en.pdf

Mastercard. 2021. "Africa claims top three spots in Mastercard Index for highest concentration of women businesses owners in the world." *Mastercard Engagement Bureau*, 11 January. Available at https://newsroom.mastercard.com/mea/press-releases/africa-claims-top-three-spots-in-mastercard-index-for-highest-concentration-of-women-businesses-owners-in-the-world/

Mbo'o-Tchouawou, Michèle et al. 2016. "Assessing the participation of men and women in cross-border trade in agriculture: Evidence from selected East African countries." *ReSAKSS Working Paper No. 38*. Addis Ababa: Regional Strategic Analysis and Knowledge Support System. Available at https://www.resakss.org/sites/default/files/Gender_and_Trade_Final_Version-38.pdf.

MINEFID. 2019. *Annuaire statistique de l'économie et des finances 2018*. Ouagadougou: Burkina Faso.

My Joy Online. 2020. "Bawumia commissions 100-bed infectious disease centre sponsored by Ghana COVID-19 Private Sector Fund." *Myjoyonline.com*, 25 July. Available at: https://www.myjoyonline.com/news/health/bawumia-commissions-100-bed-infectious-disease-centre-sponsored-by-ghana-covid-19-private-sector-fund/

Obeng-Akrofi, Ebenezer I. 2020. "Ghana will shine once more as a beacon of democracy in Africa." *Africa Blogging*, 5 December. Available at https://blogging.africa/democracy/will-ghana-shine-once-more-as-a-beacon-of-democracy-in-africa/

Oduro, Abena D. and Tsikata, Dzodzi. 2020. *Gender Analysis of Ghana's COVID-19 Response Measures*. Accra: Women's Rights (NETRIGHT) Ghana.

Ogando, Ana C. et al. 2021. "Impacts of the Covid- 19 pandemic and unpaid care work on informal workers' livelihoods", *International Labour Review*.

Okafor, Chiamaka. 2021. "ECOWAS leaders agree to reopen land borders in January 2022." *Premium Times*, 16 December. Available at https://www.

premiumtimesng.com/news/top-news/500689-ecowas-leaders-agree-to-reopen-land-borders-in-january-2022.html

Petetsi, Julius Yao. 2020. "Dr. Oko Boye gives proper definition for 'Frontline Health Workers.'" *Ghanaian Times,* 22 July. Available at https://allafrica.com/stories/202007220603.html

Pozzan, Emanuela and Cattaneo, Umberto. 2020. "Women Health Workers: Working Relentlessly in Hospitals and at Home." *International Labour Organization*, 7 April. Available at https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_741060/lang--en/index.htm

Ramírez-Soto, Max C. et al. 2021. "Sex differences in the incidence, mortality, and fatality of COVID-19 in Peru", *PLOS ONE,* 16: 6, e0253193.

Ray, Julie. 2021. "COVID-19 Put More Than 1 Billion Out of Work." *GALLUP*, 3 May. Available at https://news.gallup.com/poll/348722/covid-put-billion-work.aspx

Service d'Information du Gouvernement du Burkina Faso (SIG). 2021. "Lutte contre la maladie à Coronavirus (COVID-19) au Burkina Faso : Le couvre-feu maintenu de 19 heures à 5 heures du matin." *Service d'Information du Gouvernement du Burkina Faso*. Available at https://www.sig.gov.bf/actualites/details?tx_news_pi1%5Baction%5D=detail&tx_news_pi1%5Bcontroller%5D=News&tx_news_pi1%5Bnews%5D=320&tcHash=f99b9bb926490f1c777c5643529af8f4

Smith, Julia. 2019. "Overcoming the 'tyranny of the urgent': integrating gender into disease outbreak preparedness and response", *Gender & Development* 27 (2): 355–369

Smith, Julia et al. 2021. "More than a public health crisis: A feminist political economic analysis of COVID-19", *Global Public Health* 16: (8-9): 1364–1380.

The World Bank. 2020a. *GDP per capita (current US$) – Burkina Faso*. Available at: https://data.worldbank.org/indicator/NY.GDP.PCAP.CD?locations=BF

The World Bank. 2020b. *GDP per capita (current US$) – Ghana*. Available at: https://data.worldbank.org/indicator/NY.GDP.PCAP.CD?locations=GH

Tsikata, Dzodzi and Darkwah, Akosua K. 2019. "Work and Employment", *Ghana Social Development Outlook 2018*. Accra: ISSER. Pp. 120-149.

Tsikata, Dzodzi and Torvikey, Dzifa. 2021. *Africa's COVID-19 Responses: Proactivity, Hits and Misses and Deepening Inequalities*. Leiden: INCLUDE.

Undurraga, Eduardo A. et al. 2021. "COVID-19 case fatality risk by age and gender in a high testing setting in Latin America: Chile, March-August 2020", *Infectious Diseases of Poverty* 10: 11. DOI: 10.1186/s40249-020-00785-1.

United Nations Fund for Population Activities. 2020a. "UNFPA Supports DOVVSU To

Activate Domestic Violence Hotline." *UNFPA*, 19 April. Available at https://ghana.unfpa.org/en/news/unfpa-supports-dovvsu-activate-domestic-violence-hotline

United Nations Fund for Population Activities. 2020b. "Funding Shortfall, Lack of Protection for Four Million Women and Girls Further Destabilizes Central Sahel." *UNFPA*, 19 October. Available at https://www.unfpa.org/pcm/node/25497

United Nations Development Programme (UNDP). 2020a. *Human Development Report 2020. The Next Frontier: Human Development and the Anthropocene*. Available at https://hdr.undp.org/sites/default/files/hdr2020.pdf

United Nations Development Programme (UNDP). 2020b. *Briefing note for countries on the 2020 Human Development Report: Burkina Faso*. Available at https://hdr.undp.org/sites/default/files/Country-Profiles/BFA.pdf / https://hdr.undp.org/en/countries/profiles/BFA

United Nations Development Programme (UNDP). 2020c. *Briefing note for countries on the 2020 Human Development Report: Ghana*. Available at https://hdr.undp.org/sites/default/files/Country-Profiles/GHA.pdf/ https://hdr.undp.org/en/countries/profiles/GHA

United Nations International Children's Emergency Fund (UNICEF). *Secondary Education, April 2021*. Available at https://data.unicef.org/topic/education/secondary-education/#

Warren, Shana et al. 2020. "RECOVR Burkina Faso: Tracking the effects of the Covid-19 pandemic." *Innovations for Poverty Action*. Available at https://www.poverty-action.org/recovr-study/recovr-burkina-faso-tracking-effects-covid-19-pandemic

Wayack Pambè, Madeleine, et al. 2021. *Burkina Faso Country Study on COVID-19 measures and impacts*. Leiden: INCLUDE.

Wilkins, Henry. 2020. "In Burkina Faso, COVID-19 fight complicated by war, displacement." *Al Jazeera*. 16 March. Available at https://www.aljazeera.com/news/2020/3/16/in-burkina-faso-covid-19-fight-complicated-by-war-displacement

Wilkins, Henry. 2021. "Death Toll from Burkina Faso Attack Rises to 53. *VOA News Africa*, 18 November. Available at https://www.voanews.com/a/death-toll-from-burkina-faso-attack-rises-to-53-/6317271.html

World Health Organization (WHO). 2020a. Country Profiles - Ghana, 2020. Available at https://www.who.int/countries/gh. Accessed 15 October 2020.

World Health Organization (WHO). 2020b. Country Profiles – Burkina Faso, 2020.

Available at: https://www.who.int/countries/bfa.

World Vision Ghana. 2020. "Teenage pregnancy during COVID-19 lockdowns may keep 1 million girls out of school in Africa." *World Vision International*. Available at https://www.wvi.org/stories/ghana/teenage-pregnancy-during-covid-19-lockdowns-may-keep-1-million-girls-out-school