Mapping the socio-economic consequences of COVID-19 in Latin America and the Caribbean and the adopted responses for recovery
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Latin America and the Caribbean is at a critical juncture for development, with multiple crises of political, social, economic, and environmental nature impacting the region. To navigate these challenges, it is imperative to generate public policies aimed at building fostering resilient, sustainable, and inclusive societies. This report by the United Nations Development Programme (UNDP) captures the valuable lessons learned from the pandemic response and presents a series of pertinent public policy recommendations to address the region’s uncertain context effectively.

The Covid-19 pandemic, like many ongoing crises, has had profound economic and social repercussions, disproportionately affecting women and vulnerable individuals. It has exacerbated existing inequalities and led to a significant increase in poverty, giving rise to social and political tensions in the region. The closure of schools for extended periods has also created a deep educational crisis.

In response to the impacts of the pandemic, UNDP has prioritized three key areas: supporting health systems, promoting a multisectoral crisis management approach, and developing socio-economic impact analysis. The initiatives undertaken include facilitating the procurement of medical supplies and personal protective equipment, implementing technological measures to expand remote healthcare, strengthening health coverage for vulnerable populations, and establishing partnerships with the private sector to drive entrepreneurship, generate employment, and enhance the digital capacity of micro, small, and medium-sized enterprises. Furthermore, UNDP designed multidimensional vulnerability indices and actively promoted policies with a gender perspective.

In addition to the pandemic, several countries in the region have faced other overlapping crises, each with multidimensional effects on development. Devastating hurricanes, such as Eta and Iota, severely impacted Central America, particularly Honduras, Guatemala, and Nicaragua. Likewise, social unrest marked the political crisis in several countries, fueled by persistent inequalities and growing distrust in institutions.

[1] The Anthropocene refers to a proposed new geological epoch to describe the current period in which humans are a dominant force shaping the future of the planet. The concept of the Anthropocene arises from the idea that human activities (e.g., industrialization, urbanization, deforestation) have had a significant impact on the planet’s ecological and geological systems.
As highlighted in the latest UNDP Human Development Report 2021-2022, we are witnessing an unprecedented convergence of development challenges in terms of both speed and scale. These include the planetary shift of the Anthropocene, its interaction with human inequalities, the imperative to transition to a low-carbon future, and the intensification of political and social polarization at both national and international levels. To effectively address these issues, a systemic and multidimensional approach, as proposed by the UNDP Regional Programme for Latin America and the Caribbean 2022-2025, becomes fundamental.

Despite being three years into the COVID-19 pandemic, there remains a pressing need to: i) strengthen health response capacities in the region; ii) improve the structure of social protection systems and expand their coverage; iii) promote gender equality in policy formulation to avoid disproportionate impacts on women, including the creation of comprehensive care systems; iv) reimagine educational framework to ensure no one is left behind; v) bridge the digital divide; vi) ensure universal access to basic services; and vii) promote a new social contract that restores trust in institutions.

Advancing towards universal social protection systems is crucial for countries to enhance their resilience and effectively navigate diverse crises during times of greater uncertainty. In this regard, fiscal policy plays a pivotal role, especially through the design of countercyclical, progressive, and gender-responsive policies. Likewise, it is necessary to allocate resources where they are most needed, prioritizing social spending that guarantees the well-being of the entire population, leaving no one behind.

Learning from the past is an invaluable investment to effectively address the ongoing crises. UNDP, with its integrated and multidimensional approach, has emerged as a significant actor in generating public policies that address crises and promote development, contributing to the building of more resilient, inclusive, and sustainable societies in the region.

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INTRODUCTION

More than ever, social protection is a critical instrument in these pressing times. The COVID-19 pandemic has highlighted the gaps in risk and redistribution directly related to the high informality rates that characterise Latin America and the Caribbean region (LAC). The pandemic has also exacerbated existing inequalities within and between countries and has exposed prevalent vulnerabilities aggravating its negative consequences. These inequalities refer not only to income but also to access to education, health, labour participation and other dimensions. As Stiglitz (2020) stated, “Unfortunately, as bad as inequality had been before the pandemic, and as forcefully as the pandemic has exposed the inequalities in our society, the post-pandemic world could experience even greater inequalities unless governments do something” ¹.

By the end of 2020 it was expected that the LAC region would experience the greatest economic contraction of close to 7.7 percent (ECLAC 2021 report); the World Bank suggests it was 6.7 percent², the largest in their series. Additionally, a reversal in the hard-won human development achievements was also expected. In fact, the United Nations Development Programme (UNDP) estimated that the global human development index would decline for the first time since the measure was introduced in 1990³. Moreover, the Oxford Poverty and Human Development Initiative (OPHI) and UNDP report of 2020 showed that “under a conservative scenario of the impact of COVID-19 on school attendance and a moderate scenario of the impact on nutrition, [...] the increase in deprivations because of COVID-19 may set poverty levels back by 9.1 years, with an additional 490 million people falling into multidimensional poverty.” Although all LAC countries are on track to halve multidimensional poverty by 2030⁴, impacts might have been very different due to the large heterogeneity both in trends and levels. According to Moreno and Pinilla (2021), the prospects of poverty reduction before the pandemic were not conditional on the Multidimensional Poverty Index (MPI) level: “the results reveal that the LAC region has a very uneven distribution of COVID-19 vulnerable populations”, although Bolivia (20.8 percent), Honduras (25.5 percent), Guatemala (28.8 percent) and Haiti (41.2 percent) have in fact the largest percentage of people at risk from the pandemic⁵.

Humanity has experienced many different crises – health and socio-economic – over the past 30 years. This has affected human development and increased structural inequalities in LAC. However, what makes the COVID-19 crisis particularly devastating is its impact on human development particularly on health, income,

¹ Contrary to Stiglitz, Deaton (2021) argues that income inequality has continued the same pre-pandemic trend. https://www.nber.org/papers/w28392.
and education⁶. Beyond national averages, some negative consequences of COVID-19 are disproportionately affecting the most vulnerable groups because they are at higher risk: women, older people, young workers, migrant households, informal workers, the poor population, people who are homeless or live in informal settlements, people with underlying health conditions, among others.

In this context, this document depicts the socio-economic consequences of COVID-19 in the Latin America and Caribbean region. It illustrates the measures implemented by governments and by some UN agencies to help deal with the crisis. The first chapter presents the socio-economic consequences of COVID-19 based on the UN framework for the immediate socio-economic response to COVID-19. It has four sections: (1) economic consequences; (2) health; (3) consequences on poverty, vulnerable populations, and access to essential services (including analysis on food security, violence against women and girls, access to water and sanitation and education); and (4) social cohesion and violence. The information used in the first chapter comes primarily from the country-level Socio-Economic Response Plans (SERPs) elaborated by Country Offices (COs) with data gathered in June 2020. Thus, whenever available in the SERPs, data for specific countries will be presented as evidence of the situation in the region in each topic.

The second chapter presents a summary of the countries’ responses within the following topics: social assistance, social security, access to public services and labour market. The third chapter describes the UN System responses using data from UNDP’s reports of COVID-19 response by country⁷ and the SERPs. Finally, the last chapter presents the conclusions and a set of recommendations to help design policies for a fair and inclusive recovery. This is based on the 2030 Agenda where member states have pledged to ensure that no one will be left behind.

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Latin America and the Caribbean (LAC) was the region with the greatest expected economic contraction during 2020. By 2019, economic activity in LAC was slow with a GDP growth of 0.8 percent. According to the World Bank, in 2020 the region experienced a fall of 6.7 percent in GDP. Estimations presented in Figure 1 indicate that the smallest economic contraction was seen in Paraguay, Guatemala, and Nicaragua (less than -3 percent). On the contrary, a large number of countries in the Caribbean faced a contraction of around 17 percent (St. Lucia, Antigua and Barbuda, Barbados, Curacao, Dominica, The Bahamas, St. Kitts and Nevis, and Grenada). In the case of Venezuela, the economic sanctions imposed by the US and the severe gasoline shortage worsened the consequences of COVID-19. ECLAC’s Estimations for Venezuela indicate that the contraction of GDP in 2020 due to the pandemic could be close to -30 percent. It is worth mentioning that Guyana’s GDP (not shown in the graph) was estimated by the World Bank to be 43.5 percent in 2020 due to the oil production...
The economic contraction has and will have an important impact on poverty in the region. According to ECLAC (2020a), close to 45 million people in Latin America are estimated to fall into monetary poverty in 2020. This implies an increase in the incidence of monetary poverty from 30 percent to 37 percent\(^{10}\) (additional detailed information is presented in section 1.3.a).

Given the nature of this crisis and the consequent closure of borders in most countries, the services sector was the most affected economic sector, especially tourism (ECLAC, 2020b), which in turn disproportionately affected countries in the Caribbean and Central America, where tourism represents an important contribution to the GDP. In 2019, the tourism sector accounted for 26 percent of the total GDP in the Caribbean, and 10 percent in Latin America. For countries like Antigua and Barbuda, Saint Lucia and the Bahamas, tourism represented more than 40 percent of the total GDP\(^{11}\). The tourism sector is fundamental because of its linkages to other sectors such as food, lodging, entertainment, recreation, and transportation. In 2019, tourism represented 17 percent of direct employment in the Caribbean and 4 percent in Latin America, while the share of the tourism economy (including indirect employment) nearly doubled to 35 percent in the Caribbean and to 10 percent in Latin America (Mulder, 2020). This sector employs a high proportion of women (around 60 percent), although a large percentage of them work under informal conditions\(^{12}\). Besides tourism, other economic sectors such as construction, formal and informal commerce, manufacturing, artistic, entertainment and recreational activities are also severely affected by the combination of mandatory quarantines, loss of income, changes in consumption patterns, and the interruption of global value chains. Finally, a contraction of external demand originated a decline in exports\(^{13}\), that used to contribute by 20 percent to LAC’s total GDP. This has directly impacted people’s employment and government revenues.

The economic slowdown, quarantine, and physical distancing measures to contain the spread of the COVID-19 pandemic -prolonged in many LAC countries- combined with high labour informality, severely affected labour markets. This led to precarious job conditions, reduced wages, a decrease in participation rates and an increase in unemployment, among others. According to ECLAC, labour participation rates in LAC fell from 62.7 percent in 2019 to 57.8 in 2020. Conversely, unemployment rose from 8.1 percent to 10.5 percent in the same period. According to the International Labour Organization (ILO), close to 34 million jobs were lost in LAC by the first semester of 2020\(^{15}\)\(^{16}\).

The averages of these indicators hide some significant variations. However, in 19 out of 21 countries, labour participation rates fell, and in 15 countries, the percentage point drop was higher than 2. In Bolivia, Peru and Belize, this drop was higher than 7 percentage points. In 11 countries, women experienced higher drops in participation rates than men. Therefore, pre-existing gender gaps
in the labour markets (see Box 1) widened during the COVID-19 crisis. Unlike previous economic crises, when more women entered the labour market to counter the effects of income loss in their households, millions of women dropped out of the workforce during 2020.

There are two cases to be flagged where women behaved countercyclically, altering the country’s average for this indicator: Honduras (where labour participation rates for women increased by 6.4 percentage points) and Cuba (with a lower increase of 1.5 percentage points) (Figure 2). Looking closer at Honduras, one of the countries with the strictest quarantines worldwide according to the Oxford stringency index, more than 180,000 Honduran women entered the labour force, contributing to their household’s income. Most of these women who entered the labour force in 2020 were looking for work, but around 40 percent of them started working as informal self-employed workers. Surely, more than 70 percent of workers in Honduras work in the informal economy, which has severe impacts on social protection schemes.

In terms of unemployment rates, they increased in most countries by more than 1 percentage point. Panama and Costa Rica show some of the highest unemployment rate variations during this period, heavily affected by the increase in female unemployment rates (Figure 3).

UNDP (2021) reports that there are notable differences in the impacts on mothers of young children in the labour market. On the one hand, single mothers are seeing faster labour market recovery rates than mothers in multi-parent households. However, they face higher unemployment rates than mothers in multi-parent households as well when compared to men. These trends may relate to the fact that mothers in multi-parent households must take care of the household almost on a full-time basis when schools and care centres shut down. Mothers who are heads of households, on the other hand, do not have the option of retiring from the labour force even momentarily, as their household depends on their income to survive.

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18 Own calculations based on results from Honduras household surveys 2020 and 2019. See: https://www.ine.gob.hn/V3/egpm/
In this sense, labour market impacts are unequal, further affecting the most vulnerable, who are mainly women, young people, ethnic groups, migrants, and the poor. Women face greater challenges because they constitute a large portion of the most affected economic sectors’ labour force, like tourism and services. Most of them work in the informal economy or, more frequently, are underemployed. Women represent almost 60 percent of workers in accommodation and food activities in Latin America and the Caribbean. Although many women work in low-level, low-paid jobs (UNWTO, 2019), half of the region's tourism businesses are owned by women (World Bank, 2017)\textsuperscript{19}.

\textsuperscript{19} Obtained from CEPAL (2020b).
Box 1. For women, the playing field remains unbalanced

Gender gaps in labour markets, which originate from unconscious gender role biases, are one of the main causes of gender inequality. Women participate less than men in the workforce; when they do, they work fewer paid hours than men. They also have higher unemployment rates than men and face higher informality rates in most countries in the region. This makes them vulnerable to economic crises and leaves them unprotected when they are unable to work. These gender gaps are smaller in the higher level of household income. The poorest women face the worst inequalities. Women’s labour force participation is on average 32 percent lower than that of men. For women in the bottom 20 percent of the income distribution, it is 42 percent lower. Similarly, women spend less hours on an average of 16 percent per week than men in paid work. Those in the bottom 20 percent of the income distribution spend 24 percent less. Gender gaps in the labour force participation rate and in paid work - gender gaps in the labour supply - are perhaps the most damaging because they translate into economic dependency.

Gender gaps in the labour market, by income group, 2019

Source: UNDP calculations; national household surveys, 15 countries; 12 countries for informality.
Note: The year is 2017 for Chile and 2018 for Mexico. The working-age population restricted to 15 years or more.
As shown in section 1.3.e, gender gaps in the labour markets are closely related to gaps in distribution of care responsibilities, particularly considering the overburden women face in terms of the time they allocate to care and domestic unpaid work. Consequently, gaps in the hours dedicated to paid work also increase with the number of children. This is one of the reasons why access to quality care services is essential and should be a priority of public policy. Furthermore, the COVID-19 health crisis that led to school and care services closures put even more pressure on women, and there is solid evidence that their performance in the labour market was affected.

The disproportionate impact of the crisis on women and other vulnerable groups is reflected in other indicators as well. In the British Virgin Islands, for example, estimations suggest an increase in unemployment from around 3 percent to 12 percent-17 percent in 2020, with a disproportionate impact on women and migrants who constitute around 63 percent of the tourism labour force. In Costa Rica, indigenous populations face big challenges given that their own economic dynamics are concentrated in tourism, particularly in the sale of handicrafts and agricultural production. In Paraguay, estimations indicate important gender differences; 78 percent of women are at high risk of losing their jobs or undergoing workforce change, while only 52 percent of men are in the same situation.

The lockdown measures also affected regular operations for Micro, Small and Medium Enterprises (MSMEs) which in turn have repercussions on employment and household income. The important decrease in income for companies, particularly during the second quarter of 2020, led to a cease of activities in many cases. According to ECLAC’s estimates, it is likely that about 2.7 million formal enterprises, most of them MSMEs, will cease activities consequently losing 8.5 million jobs. Because their businesses fall under the hardest hit economic sectors (e.g., retail, miscellaneous stores and small food businesses), micro and small enterprises will be the most affected.

According to country-level Socio Economic Response Plan (SERP) reports, MSMEs represent close to 100 percent of the productive system in Guatemala and generate over 80 percent of total employment. A similar scenario is observed in the Dominican Republic, where more than 98 percent of businesses are MSMEs. The socio-economic assessment of MSMEs of this country conducted by the second quarter of 2020, indicates that they have been severely impacted by the decline in income: only 2 percent of them are operating regularly since the pandemic started, 20 percent partially operating, and 78 percent had ceased operations. A similar situation is observed in El Salvador where, according to the National Commission of Micro and Small Enterprises (CONAMYPE for its Spanish acronym), MSMEs represented 99.67 percent of all registered businesses by June 2020. According to this same source, 50 percent of them saw a sharp decline in their sales and 4 percent were forced to shut down their operations due to the pandemic. As for Mexico, the National Institute of Statistics (INEGI for its Spanish acronym) established that by the end of 2020, close to 1 million MSMEs shut down their operations (approximately 20.8 percent of all operating MSMEs), and 86.6 percent of businesses were somehow affected by the pandemic.

In Honduras, MSMEs generated close to 70 percent of the country’s employment in 2018. Due to the economic impact of COVID-19, one out of three businesses is at risk of completely ceasing operations. Finally, in Bolivia, according to the survey carried out by UNDP, 26.6 percent of MSMEs declared not having any activity, and 63.3 percent ceased activities during the quarantine.

Due to the partial or total suspension of production in certain economic sectors as well as restriction on trade, another consequence of the COVID-19 containment measures was the disruption of production flows. Value chain disruptions have an important impact on MSMEs. They have fewer supply options, have more difficulties finding new suppliers, and, most probably, have a limited or non-existent stock of inputs. Moreover, MSMEs, in comparison to large enterprises, have greater resource constraints. This limits their capacity to adapt to new contexts. They also face more difficulties regarding credits with the banking system, which
consequently, force them to increase the price due to supply chain disruptions\textsuperscript{32} \textsuperscript{33}.

Considering all the above, and the fact that MSMEs account for a large percentage of employment in the region -dominated by women and young people-, the pandemic had a great impact on unemployment, through undermining their capacity to sustain and create decent and productive employment. According to a study by the International Trade Centre, while teleworking was the most common coping mechanism for large companies, MSMEs resorted to downsizing, especially those in manufacturing.\textsuperscript{34}

1.2. Health

Latin American and Caribbean healthcare systems were severely hit by the COVID-19 pandemic. These systems were already overburdened before 2020, partly because of persistent health challenges such as tuberculosis or dengue, and were characterized by inequalities regarding access, distribution, and quality of services.

The large size of the informal sector in the region’s economies means that public healthcare centres (i.e., state-run hospitals and clinics) are the only source of medical care for millions of people. Even so, universal coverage is not a reality in all countries. For instance, in 2018 around 16 percent of the population in Mexico (roughly 20 million people) lacked access to healthcare because they were not affiliated to any social security, they did not have private insurance and were not covered by Seguro Popular either\textsuperscript{36} \textsuperscript{37}. In Honduras, 52 percent of the population lacked access to healthcare\textsuperscript{38}. In Panama, in 2019, 46 percent of women in the lowest quintile of income had their health needs unmet\textsuperscript{39}. Furthermore, the different subsystems (private insurance, public coverage, etc.) generally have substantial gaps regarding the quality of assistance.\textsuperscript{40}

At the same time, the region’s large informal economies make it difficult to finance healthcare via taxation, which causes many countries to struggle to fund their health system. In that sense, investment in health varies significantly between countries. Brazil, Uruguay, Argentina, Chile, along with Cuba spend the highest proportion of their GDP on health (9 percent or above). Meanwhile, Peru, Mexico, Guatemala, and several Caribbean countries spend less than the 6 percent recommended by the World Health Organization –WHO- (see Figure 4), the lowest case being that of Venezuela with 1.2 percent of health expenditure.\textsuperscript{41} Most of these countries have high out-of-pocket expenditure as well, specifically for medicines. Some of the highest out-of-pocket expenditure rates can be found in countries like Ecuador (44 percent of total spending in health), Mexico (41 percent), Chile (32 percent), Peru and Panama (31 percent).\textsuperscript{42}

The limited supply and precariousness of personal protection equipment for front-line health workers such as the insufficient number of other necessary equipment like ventilators\textsuperscript{43} is a persistent problem

\textsuperscript{34} Ibid.
\textsuperscript{36} Seguro Popular is Mexico’s public health insurance mechanism to provide financial protection and ensure access to health services to the population not covered by social insurance.
\textsuperscript{40} Ibid.
\textsuperscript{41} Data source: http://rdata.undp.org
in many countries\textsuperscript{44}. Data from UNDP’s Data Futures Platform\textsuperscript{45} indicate that many countries such as Guatemala, Haiti, Honduras, Venezuela, or Nicaragua, have a very small ratio of hospital beds (see Figure 5), which has become highly problematic in face of the pandemic. Furthermore, low testing capacity for COVID-19 was a particular problem in some countries in the region.

The limitations and shortcomings of healthcare systems are also shaped by geography. Geographic distribution of healthcare centres typically excludes portions of the population, particularly (but not limited to) indigenous peoples and rural population, who face restricted access to primary care facilities and thus lack access to timely, comprehensive, and quality health services.

The decrease in the diagnosis and treatment of other communicable and non-communicable diseases has been reported in many countries. In March 2020, Paraguay observed that medical consultations dropped to 34 percent when compared to the same month the previous year; in May, that number increased to 91 percent\textsuperscript{46}.

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{figure4.png}
\caption{Health expenditure (percent of GDP), 2017}
\end{figure}

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{figure5.png}
\caption{Hospital beds (per 10,000 people), 2016}
\end{figure}

\textsuperscript{45} https://data.undp.org/explore-all-data/.
\textsuperscript{46} UN Paraguay (2020). Marco de las Naciones Unidas para la respuesta socioeconómica inmediata ante el COVID-19. p. 22.
The pandemic has also led to a decrease in preventive health care related to sexual, reproductive, and maternal health. In the Dominican Republic, an increase in maternal and neonatal morbidity and mortality has been observed, particularly among the most vulnerable (migrants, poor population, etc.) because they face greater barriers to access health services. In Panama, the negative impact that the pandemic may have on prenatal, postnatal, and safe delivery care, especially in rural areas, is a major concern. Specialists predict that if community programs for reproductive and maternal health education cannot continue due to confinement measures, or if pregnant women cannot reach maternal homes or shelters, many indigenous women will choose to give birth at home, risking their lives and those of their babies.

Higher access barriers to sexual and reproductive health services, greater difficulties to access contraceptive methods, and the increase in domestic and sexual violence in LAC during lockdown (described in more detail in the next section) could help explain an increase in teenage pregnancies. The pandemic seems to have exacerbated the risks and eroded measures to protect teenagers and children, especially girls, against physical, psychological, and sexual violence in the home. An early report by the United Nations Population Fund (UNFPA) predicted the possible consequences that confinement measures would have on unplanned pregnancies worldwide. This showed a bleak panorama for those countries where mandatory quarantines were held for several months. Further analysis is required, but the situation in LAC could result in higher numbers of adolescent pregnancy “as various sources and sectors expect that it will be an increase in the magnitude and severity of violence compared to the period before the pandemic.”

Other consequences of the pandemic include, for example, issues related to mental health, a common problem to all countries. The socio-economic impact of confinement measures and isolation as well as its impact on mental health have not been addressed. Different studies conducted in the region of the Americas by WHO (2020) show an increase in restlessness, depression, anxiety, and insomnia, among other conditions, because of the COVID-19 pandemic. “Furthermore, COVID-19 itself is associated with neurological and mental complications.” Also, a recent study from the United Nations Children Fund (UNICEF) shows that COVID-19 has an impact on the mental health of teenagers and young adults in LAC between the ages of 13 and 29. 46 percent of them reported having less motivation, 43 percent of young women felt pessimistic about the future and only one third asked for help.

Difficulties in the manufacture of medicines is a problem in Cuba where the production is compromised due to the shortage of medical supplies. Also, it is worth noting that many Cubans (43 percent) have no access to the Internet and are not able to access telemedical services. Therefore, healthcare needs for a considerable part of the population are not met.
Finally, the situation faced by health and front-line workers during the coronavirus outbreak must be considered from a gender perspective. Women represent around 70 percent of front-line health workers, and are especially overrepresented among nurses, midwives, and community health workers\(^\text{57}\). They are high-contact occupations within the health sector and have high infection rates for the COVID-19 pandemic. UN Women reports that the risk for women health workers to be infected with the virus is about three times higher than for their male colleagues, mainly because they are more likely to be front-liners\(^\text{58}\) which increases their risk of infection.\(^\text{59}\)

Even though women are at the centre of the COVID-19 response, occupying crucial positions as educators, front-line medical workers, and care providers, recent data shows that they remain significantly underrepresented in COVID-19 planning and decision-making. To monitor the extent of women’s inclusion in the COVID-19 response, the UNDP/UN Women COVID-19 Global Gender Response Tracker, in partnership with the Gender Inequality Research Lab (GIRL) at the University of Pittsburgh, developed a tracker to monitor women’s representation and leadership in COVID-19 task forces. The overview for LAC is that only 18 percent of task forces that advise on the response to the COVID-19 crisis are led by women.\(^\text{60}\) Moreover, women represent about 28 percent of the members of decision-making task forces examined in LAC. Within expert task forces, they only represent 25 percent. (Figure 6). As can be seen in Figure 7, there is gender parity in only 6 percent of task forces.

\(^{57}\) UN Women (2020). From Insights to Action. Gender Equality in the Wake of COVID-19

\(^{58}\) Front-liners include nurses, midwives, and community health workers.

\(^{59}\) Ibid.

1.3. Consequences on poverty, vulnerable populations, and access to essential services

1.3.a. Poverty

Pre-pandemic measurements in Latin America and the Caribbean show high rates of poverty in many countries of the region. As shown in Figure 8, in Venezuela, Nicaragua, Colombia and El Salvador, one in four people lived with less than $5.50 a day (considering 2011 international prices). In Honduras and Guatemala, that is the case for half of their population, and in Haiti, almost eight in ten people experience that level of poverty. Concomitantly, extreme poverty is also high in those countries. In Haiti, 24 percent of people live with less than $1.90 a day (2011 international prices); in Honduras, 16.5 percent of the population is extremely poor, and in Guatemala, 8.7 percent.

![Figure 8. Percentage of the population living under international poverty lines (around 2018)](http://data.undp.org)

According to national poverty lines, the situation is also severe. For instance, the latest Survey on Living Conditions in Venezuela (Encovi 2019-20) shows that 96 percent of Venezuelans are income poor and 79 percent live in extreme poverty. In Guatemala, according to its national poverty line, poverty increased from 51 to 69 percent between 2006 and 2014, and extreme poverty increased from 15 to 23 percent.61

The concept of multidimensional poverty transcends income and encompasses multiple dimensions of development, such as education, housing, the community environment, and access to basic services. Thus, the Multidimensional Poverty Index (MPI) helps depict a more precise picture of the population’s vulnerabilities and unmet basic needs, taking into account multiple deprivations in different dimensions that affect peoples’ lives. According to the national MPI designed in Guatemala, three out of five inhabitants...

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experience simultaneous deprivation in at least 30 percent of the evaluated indicators. The most severe deprivations are in access to education, occupational precariousness, food and nutritional security, and housing conditions. In Mexico, almost 42 percent of the population was identified as multidimensionally poor according to its national MPI of 2018 designed by the National Council for the Evaluation of Social Development Policy (CONEVAL).

Furthermore, structural income inequalities characterise the region. Although it is not one of the poorest countries, Brazil is at the top of the list of the most unequal countries in Latin America with a Gini index of 53.9, followed closely by Honduras (52.1) and Colombia (50.4).

The COVID-19 crisis most likely increased poverty rates in most countries during 2020. Early estimations show that in Costa Rica, the percentage of households in poverty could range between 24 percent and 29 percent, while in 2019 that figure was 21 percent. In the Dominican Republic, estimates suggest an increase in poverty from 24 percent in 2018 to 36 percent in 2020, assuming a decrease of 20 percent in households’ income, or 40 percent under a more pessimistic scenario. According to the latest economic report by the Economic Commission for Latin America and the Caribbean (ECLAC), El Salvador will have the highest poverty growth in Central America. By the end of 2020, it is projected that 4 out of 10 Salvadorans will be in poverty (in 2019, this number was 3 out of 10). In the case of Argentina, during the first trimester of 2020 poverty grew 7 percentage points when compared to the same period in 2019 (from 38 percent to 45 percent). Lastly, projections in Peru show that poverty will most likely increase 10 percentage points during 2020 (from 20 percent to 30 percent).

These increases in poverty rates will not be distributed homogeneously throughout the population. Different characteristics increase the probability of being born poor and decrease the number of opportunities available for upward social mobility. Children and adolescents, women, rural populations, indigenous peoples, and migrants are more severely hit by income and multidimensional poverty in every country in the region. Therefore, the risk they experience of falling into poverty is higher than that of other population groups. Estimates from UNDP and UN Women for LAC show that poverty rates will increase for both men and women during 2020; there will be almost 21 million poor women in 2021 and almost 20 million poor men. Despite this change, the feminisation of poverty rate remains constant between 2019 and 2020: for every 100 men in poverty, there are 103 poor women in the LAC region.
There is a strong correlation between poverty and food insecurity. Food insecurity is defined as the disruption of food intake or eating patterns because of lack of money and other resources. It does not necessarily cause hunger, but hunger is a potential outcome of food insecurity. The current global economic crisis has compromised many households’ access to secure food sources, aggravating an already relevant crisis in some countries in the region. Around 2017, more than half of the population in Honduras suffered from moderate or severe food insecurity. In Guatemala and El Salvador, more than 40 percent of the population faced these conditions, and in Mexico, Argentina, and Peru, around one out of three people experienced this level of food insecurity. Even in countries with low poverty rates, such as Uruguay or Chile, there is a substantial percentage of the population that register moderate or severe food insecurity (Figure 9).

Estimates for 2020 show that the percentage of households that suffer from food insecurity is increasing at unprecedented rates. Preliminary World Food Program (WFP) projections indicate that severe food insecurity in Colombia could reach three million people (that is, roughly 6 percent of the population of the country), a figure eight times higher than pre-pandemic levels. According to the WFP, 98 percent of indigenous households and 96 percent of Afro-descendant households in Colombia expressed concern about not having enough food for the next few days. Among refugees and migrants, close to 95 percent have reduced the number of their daily meals. For the Dominican Republic, similar estimates suggest that around the access of eight million people to food would be affected: close to 7.4 percent of the population would be in severe food insecurity. In El Salvador, WFP estimates that as early as May,
there was an increase of 8 percentage points in the proportion of households that suffer from severe food insecurity, when compared to 2019 (from 21 percent to 29 percent).\(^75\)

Food systems are directly affected by changes in supply and demand. This is caused by the disruption of value chains that affected the production and distribution of food, and the decrease in their purchasing power. In Cuba, lower food availability for vulnerable groups of the population during 2020 was partly a consequence of a high dependence on imports of the agri-food sector\(^76\). In Honduras, quarantine measures impacted their access to food markets; in April, half of the grocery stores and other food-provider businesses had shut down, and 78 percent of them did not have enough stocks. This resulted to price increase of basic products between 12 percent and 46 percent (depending on the product and the geographical area).\(^77\)

1.3.c. Vulnerable populations

As mentioned above, a series of population groups are more vulnerable to the socio-economic impacts of COVID-19. Based on the review of the Socio-Economic Response Plans (SERP) of the LAC countries, the main groups identified as more vulnerable are women, the elderly, young people, children, the indigenous and Afro-descendant population, migrants, refugees, LGBTIQ+ population, rural population, urban poor, population with disabilities, people living with HIV and prison population.

Disaggregated data show that women are disproportionally affected by physical distancing measures implemented by governments to control the pandemic. In 75 percent of Latin American countries the share of women in informal employment exceeds the share of men\(^78\); this means they receive little or no social protection. In addition, containment measures, such as closures of care institutions and schools, resulted in increased unpaid workload, and there is an increase in violence against women and girls (see section 1.3.d). These impacts will be further analysed in the next two sections.

Indigenous people already faced structural barriers that limited their full socio-economic inclusion: while they make up 8 percent of the population in the region, they also constitute roughly 14 percent of the poor and 17 percent of the extremely poor.\(^79\) Both indigenous and Afro-descendant peoples are suffering disproportionate impacts of COVID-19, including low access to health services and difficulties obtaining food and medicines, widening the pre-existing structural gaps these populations suffered in several dimensions (see Box 2).
Box 2. Ethnic and racial minorities lack recognition as active economic and political agents

The Indigenous and Afro-descendant population represents about 25 percent of the total population of the region and is unevenly distributed over the territory. Indigenous peoples have a greater relative presence in the Andean countries and in Central America and constitute approximately half of the total population in Bolivia, Guatemala, and Nicaragua. However, its percentage in the expanded Southern Cone is less than 5 percent (except in Chile, where it is 13 percent). Afro-descendant communities, by contrast, predominantly settle in northeastern South America and the Caribbean, and constitute the majority in countries such as Antigua, Barbados, Barbuda, Dominica, Grenada, Haiti, and Jamaica. From a regional perspective, ethnic-racial minorities represent a higher proportion of the population in the poorest countries.

An important challenge for inclusive development in LAC throughout the region is the deficiency in the recognition of ethnic-racial minorities as active economic and political agents, and in the eradication of the structural injustices that have historically relegated them to the margins of society. The systematic segregation of indigenous peoples and the Afro-descendant population is the enduring legacy of exploitative power relations that were established during colonial rule and slavery. They survived legal reforms intended for their elimination. Despite the growing recognition of traditional authorities, autonomous jurisdictions, and the rights of association and political representation, indigenous and Afro-descendant political movements remain on the fringes of power. In light of the continuous violations of their rights to difference, identity, territory, self-determination and autonomy, the participation of approximately a quarter of the total population of the region in development routes that "leave no one behind" has been notably hampered.

As a result, these populations continue to be deprived of the opportunities enjoyed by other groups. In fact, they tend to be overrepresented among the poorest in the region, experience greater economic vulnerability and exposure to crises, show lower levels of access to education and educational attainment, and tend to inhabit the most impoverished and underdeveloped territories.

The youth between the ages of 14 and 24 also constitutes a vulnerable group. Even before the pandemic, they faced higher rates of unemployment, informality, and under-employment. Currently, most of them are excluded from the labour market and have no income. For example, during the period from February to April 2020, the unemployment rate for this group was 30.9 percent in Costa Rica.80

Migrants in LAC also see their situation worsen with the COVID-19 outbreak, especially migrant women. In general, migrants are at great risk as they have housing difficulties and often face overcrowding. They also face nutritional deficiency, and their income depends on daily informal activities. In some countries, reports show that most of them are undocumented, or have an irregular status, and therefore have no access to cash transfer programs or any kind of social protection strategy to mitigate the impact of COVID-19. In the case of Venezuela, this crisis overlapped with the humanitarian crisis of the country, which led to a large flow of migrants to neighbouring countries and throughout the region.

Despite the scarcity of available data, LGBTIQ+ population that face high levels of discrimination (see Box 3), could be experiencing increased violence and be facing specific challenges. In Brazil, data from civil society organisations indicate that the number of murders of transgender people has increased to 13 percent since the start of the physical distancing measures.81 The Inter-American Commission on Human Rights (IACHR) recently expressed its concern over reports of acts of violence and discrimination suffered by trans and gender-diverse people in Panama during the period of enforcement of the measures that partially restricted the mobility of people based on their gender, as part of the COVID-19 pandemic containment strategy.82 In addition, prohibition of entry of trans people to health centres, supermarkets, and other establishments that provide basic needs has also been reported.83

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82 On specific days of the week women or men were allowed to circulate around cities.
As the pandemic continues, studies show that the population living with HIV may be more vulnerable, especially those with severe immune system damage, and will suffer more serious consequences if infected with COVID-19 (Rosenberg, 2021). Greater barriers to accessing health services (treatment and medication) derived from the physical distancing measures imposed by LAC countries put this population at a more vulnerable state. For example, in the Dominican Republic, only 48 percent of people living with HIV undergo treatment and 52 percent do not have access to medications leading to a weakened immune system. This situation places them at high risk of complications if they catch the COVID-19 pandemic.

Finally, the sensitive situation of people deprived of their liberty must be acknowledged, as they face high-risk conditions due to the limited space available to meet the minimum standards for physical distancing measures. More than 1.4 million people in the LAC region are deprived of their liberty, and some countries in Central America and the Caribbean have some of the highest imprisonment rates worldwide. Such is the case of El Salvador and Cuba where 562 persons and 510 persons per 100,000 inhabitants respectively are deprived of their liberty. In 2020, UNODC, WHO, UNAIDS and OHCHR issued a joint statement on COVID-19 in prisons and other closed settings to draw the attention of political leaders to the heightened vulnerability of prisoners and other people deprived of their liberty to the COVID-19 pandemic, and urge them to take all appropriate public health measures to help them. This statement emphasised the need to minimise the occurrence of the disease...
in these settings. This is to guarantee that adequate preventive measures are in place to ensure a gender-responsive approach and prevent large COVID-19 outbreaks.

COVID-19 has varying levels of impact on vulnerable groups, reinforcing previous structural inequalities. For this reason, it is essential to design and implement public policies that are sensitive to their diverse needs and that empower the most vulnerable, ensuring that the principle of leaving no one behind is met.

1.3.d. Violence against women and girls

Violence against women and girls (VAWG) is “a pandemic within the pandemic”. The high levels of VAWG, which were already alarming before the outbreak of the pandemic (Figure 10), are exacerbated by lockdown measures. Restrictions on movement create barriers for women seeking to escape abuse. Their access to health services, including sexual, reproductive, and maternal health services, or community services like crisis centres, shelters, legal aid, and protection, is also compromised. For example, in remote areas, technology scarcity makes it difficult to report cases and consequently identify and protect the victims.

Figure 10. Violence against women

Percentage of women physically or sexually abused by an intimate partner, latest available year, 2003-2017

Source: Taken from UNDP (2021b). Regional Human Development Report (RHDR). "Trapped: high inequality and low growth in Latin America and the Caribbean", p. 15

Note: The orange line indicates the LAC average.
In many countries of the region, calls to helplines for cases of gender-based violence increased during the COVID-19 quarantines. In Colombia, counselling hotlines for women who are victims of violence increased by 142 percent between March 25 and April 11. This was a period in which compulsory isolation was decreed in the country. Legal Medicine reported that 16,473 women were victims of domestic violence (this represents a percentage change of 57 percent in comparison to the same period in 2019) and there was an increase of 33 percent in femicide between March 25 and May 31 of 2019 and 2020. In Mexico, several NGOs reported that there were 103,117 calls related to gender violence in April 2020, which is approximately 143 calls per hour. This represents an increase of almost 40 percent compared to the previous year. Moreover, online searches for issues related to domestic violence increased significantly during confinements in countries such as Argentina, Brazil, Chile, Colombia, and Mexico (PNUD, 2021).
Apart from these, there is evidence of a different nature that shows the increased levels of gender-based violence in the region during the pandemic. In Argentina, a victimization survey shows that tensions between couples intensified during confinement, leading to a greater prevalence of domestic violence at an emotional, sexual, and physical level (Perez-Vincent et al., 2020). In Central America, Infosegura documented greater levels of gender-based violence in Costa Rica, El Salvador, Guatemala, and Honduras during the first trimester of 2020 (PNUD, 2021). Similarly, almost half of the women interviewed in five Caribbean countries (Grenada, Guyana, Jamaica, Suriname, and Trinidad and Tobago) claimed to have suffered at least one form of physical, sexual, economic, or emotional violence during the pandemic (Sayed y Bartels-Bland, 2020).

Femicides, as the most violent expression of violence against women, also seem to have increased during the pandemic, although countries do not report as much information in this regard. In the case of El Salvador, from January to June 2020, the violent deaths of women amounted to 57 cases, 35 cases of attempted femicides and four femicide suicides by abetment. The highest percentage of these deaths refer to young women between the ages of 18 and 30. In addition, the Health Ministry reported that pregnancies of girls aged 10 to 14 increased to 78.16 percent from April to June93.

Although there is still a long way to go, it must be noted that around 52 percent of all gender-sensitive measures implemented in response to COVID-19 in Latin America and the Caribbean (214 out of 414 measures, carried out in 38 countries and territories) focused on preventing and/or responding to violence against women and girls. These measures were primarily oriented to: (1) strengthen services for women survivors (141 measures in 29 countries, including new helplines and other reporting mechanisms, police and judicial responses, coordinated services, shelters and continued provision of psychosocial support); (2) integrate components for the eradication of VAWG in response plans to COVID-19 (11 measures in 9 countries); (3) collect and use data (11 measures in 10 countries); and (4) raise awareness and communication (42 measures in 25 countries).94

1.3.e. Care economy

Due to the lack of co-responsibility in care among social actors (states, private sector, communities, and families) and between genders, the current distribution of care responsibilities in LAC is extremely unbalanced, falling mainly on households and specifically on the unpaid work of women. Women and girls are often the primary caregivers at home and in general have more domestic chores and care responsibilities compared to men, spending an average of three times more in non-remunerated care work. For instance, according to the RHDR (2021), for every hour spent by men on unpaid work in Colombia, women dedicate an average of 3.9 hours. It is similar in Mexico: for every hour spent by men on unpaid work, women spend 3.1 hours. This gap widens in the

lowest quintiles of income.\textsuperscript{95} Moreover, data gathered by ECLAC from different time use surveys show that these gaps are persistent throughout the region (Figure 11).

Regarding this figure, total work time refers to the sum of paid work time and unpaid work time. Paid work refers to work done to produce goods or services for the market and is calculated as the sum of time devoted to employment, job search and commuting. Unpaid work corresponds to work done without payment and developed mainly in the private sphere. It is measured by quantifying the time a person spent on consumption, unpaid domestic work, and unpaid care for their own home or to support other household work.

As can be seen in this figure, the average time spent on unpaid work by women in all the LAC countries is considerably higher than the average time spent on unpaid work by men. The opposite situation occurs with paid work: men spent considerably more time on paid work. These trends are not incidental, as they unveil the sexual division of labour that is based on the ideological separation of the spheres of production and reproduction into ‘work’ and ‘home/family’ respectively. The former is considered the sphere of men and the latter that of women, with the wage acting as the mediating factor between the two spheres.

Traditionally, and despite its importance for the sustainability of life, care work is not considered as part of the economy, nor is it associated with development.

As stated by a recent study conducted by UNDP Mexico on mothers that work remotely\textsuperscript{96}, the COVID-19 pandemic revealed a rupture of a social pact that, at least for a part of the day, care work and


educational opportunities for children will happen outside the household. However, when education and care centres close, mothers are in the front-line as emergency caretakers. At the same time, the crisis also blurred the line between paid and unpaid work, as every activity (work, care, education, etc.) is happening within the household. This breaks the traditional concept that work and personal life are two separate and independent spheres, which must be urgently recognised in public policy.97

The burden of care responsibilities, including domestic chores, affect women differently. Young girls, for example, drop out of school because they had to help in the household. In Guatemala, for example, 4.9 percent of girls, adolescents, and young women reported school absenteeism due to housework, 0.4 percent due to care responsibilities, 9.8 percent due to getting married, and 1.4 percent due to pregnancy. It is likely that the impacts of COVID-19 may have aggravated the situation, which in the long term will harm the development of girls and adolescents and prevent them from reaching their full potential. For this reason, it is important that countries collect data to establish how this scenario has evolved.

The ongoing health crisis has highlighted the unfair social organisation of care and has unveiled the significant weight and value that unpaid and unacknowledged domestic and care work represents for the global economy, normally carried out by women. Since the start of the COVID-19 outbreak, unpaid care work has disproportionately increased for women in LAC. This is mainly due to school closures and the rising numbers of infected persons in many countries and the need to care for patients and children at home98. Women in poverty are disproportionately burdened with care and other specific causes that affect their economic autonomy.

The COVID-19 Human and Economic Impact Assessments (HEAT) Report for the British Virgin Islands states that close to 70 percent of women experienced an increase of unpaid work99. In Argentina, according to the UNICEF rapid survey100, 51 percent of interviewed women over 18 years of age felt a greater load of household chores during the period of social isolation. This refers to taking care of the children, shopping, preparing food and household chores. Upon further analysis, the causes of overload are house cleaning (32 percent), care burden (28 percent), meal preparation (20 percent) and homework assistance (22 percent). In Uruguay, according to a UN Women and UNICEF assessment, both men and women increased the time they allocate to unpaid work during the crisis, but the gender gap remained the same: women surpass men’s daily hours dedicated to unpaid work by 76 percent. In the lowest educational levels, this gap widens to 110 percent101. Finally, according to a digital Socio Economic Impact Assessment (SEIA) conducted by UNDP in Suriname’s Indigenous communities, while 40 percent and 36 percent of women report to have increased the number of hours they dedicate to cleaning and cooking respectively, only 12 percent and 8 percent of men report the same102.

1.3.f. Access to essential services and adequate living conditions

During the pandemic, access to essential services and adequate living conditions are key to people’s resilience. However, in Latin America and the Caribbean, not everyone’s basic human rights are respected.

Although around 95 percent of the population in the region has access to at least basic drinking water services\(^\text{103}\), it is less than 90 percent in rural areas. In countries with a high percentage of rural population such as Bolivia, Peru or Ecuador, access to drinking water services in rural areas ranges between 76 percent and 83 percent. In Haiti, only 43 percent of the rural population has access to drinking water; in Nicaragua, it is only 59 percent.\(^\text{104}\) In Brazil, access to safe water in remote areas is limited or inexistent, and this is also true for favelas. In the Dominican Republic, while 86 percent of households in urban areas have domestic water connection, only 14 percent of households do in rural areas\(^\text{105}\). In El Salvador, 21 percent of households with children and adolescents lack drinking water services; in Panama, approximately 30 percent of households with children have access to drinking water only three times a week or less.

Regarding access to basic sanitation services, more than 80 percent of the population in the region have access to such services. However, in Nicaragua and Peru, this figure drops to 74 percent; in Guatemala, to 65 percent; in Bolivia, 61 percent; and in the case of Haiti, an outlier in the region, only 35 percent of the population have access to basic sanitation services.\(^\text{107}\) This is a very problematic scenario considering that the lack of access to water and sanitation services, pre-existing hygiene practices and general living conditions are determining factors for the spread of COVID-19.

Lack of access to water and sanitation services is not only a problem in rural areas, but also of informal settlements in urban areas (slums). The percentage of population living in slums varies from country to country and constitutes a structural problem in the region. In Haiti, Bolivia, Ecuador, Guatemala, Peru, and Guyana, more than one in three people live in informal settlements (Figure 12). Housing conditions in these settlements are usually precarious and insecure, and overcrowding is the norm. They also lack other essential services such as electricity, internet connection and communication services, and, on many occasions, have difficult access to hospitals and schools.

\(^\text{103}\) The countries with lowest access to basic drinking water services amongst the general population are Haiti (65 percent) and Nicaragua (82 percent).


In general, overcrowded conditions increase with poverty. Sharing space among family members to do their respective work, study, and leisure needs is usually more difficult for the poor. In fact, the average number of rooms per capita in households belonging to the poorest 20 percent is less than half that of households in the richest 20 percent of the income distribution in the region (Figure 13). Furthermore, a greater proportion of the poorest households in the region live in spaces where the ceilings, walls and floors are built with low-quality materials (PNUD, 2021).
Finally, during the current crisis, Internet access is a necessity and a fundamental part of contemporary life. The digital divide in the region is significant, both between and within countries. While more than 70 percent of the population are Internet users in some countries, less than half use it regularly. In El Salvador, Honduras, and Nicaragua, for example, only one out of three inhabitants are internet users. In St. Vincent and the Grenadines, that figure drops to one out of five (Figure 14). Furthermore, there is a gender gap in the access to these technologies. For instance, in Bolivia only 32 percent of women are Internet users, even though that figure rises to 44 percent when considering the total population. In Panama and Ecuador, 53-54 percent of women are Internet users, compared to 57-58 percent of the total population.108

Figure 14. Internet users, total (percent of population)

![Bar graph showing internet users by country](http://data.undp.org)


The COVID-19 pandemic led to at least three negative consequences on children and adolescents: the abrupt closure of schools, confinement due to the lockdown measures taken by most governments, and a global economic recession. These events will have short and long-term repercussions directly on children and adolescents, as well as on their families, teachers, and the education systems.\(^{109}\)

Education is a sector severely affected by the pandemic, as the closure of schools was widely implemented in all countries to control the spread of the virus. According to UNESCO, Latin America and the Caribbean is the region of the world that ranks first among the countries with the highest number of weeks of complete and partial school closures during 2021.\(^{110}\) The first direct impact on students is the disruption of learning.\(^{111}\) In addition, school closures, combined with children and adolescents being confined to their homes and the pressure of the deteriorating economic situation puts on parents, have increased the risk of violence and maltreatment.\(^{112}\)

Remote classes pose certain challenges, especially for the most vulnerable children and youth, who not only lack adequate access to the internet and to digital devices but also have less family support making it difficult to engage in the lessons (Figure 15). Moreover, a recent World Bank study indicates that distance education could only mitigate between 18 percent to 6 percent of learning losses due to public school closures (where most vulnerable students are enrolled), assuming a length of 6-10 months.\(^{113}\) Under these circumstances, the region will face significant learning losses for an entire generation of students. The same study shows that assuming 7-month school closures, the proportion of students below the minimum proficiency levels on PISA scores would increase from 53 percent to 68 percent. The vulnerable young, who may need to drop out of school and become income providers to their households, may permanently leave the educational system, leading to greater difficulties to engage in productive and quality jobs. In the long term, this will end up in significant losses of human capital and productivity, widening inequalities and perpetuating intergenerational poverty.

\(^{109}\) Ibid.


\(^{114}\) PISA is the OECD’s Programme for International Student Assessment.
The limited access to distance education due to poor Internet connection and lack of technological devices is a common challenge among countries during the pandemic. For example, in Guatemala only 17 percent of households had internet access at home prior to the pandemic. In Uruguay, only 28 percent of students from the lowest quintile participated remotely in school activities during the closure of schools. This situation was even worse for those with precarious socio-economic status or those located in remote areas. In the Dominican Republic, an estimated 70 percent of the population did not have access to a desktop computer, laptop, or tablet. In rural areas, only 15 percent had access to such devices, compared to 35 percent in urban areas115.

During 2020, a significant number of students in the region could not continue classes online when the schools closed. This will likely have a negative impact on their ability to learn and on the accumulation of human capital in the long term. It is also important to highlight the deterioration of mental health, which is reflected in the increase in depression and anxiety experienced by children and adolescents during the quarantines.

In addition, the situation regarding education already presented a worrying panorama on a regional level prior to the COVID-19 pandemic. Countries in the region were facing a learning crisis that disproportionately affected the poorest116. An average of 50.8 percent of children under 10 years of age in LAC do not have the necessary reading skills for understanding simple texts117. In Honduras, for example, there was a high dropout rate and school lag (only 32 out of 100 students managed to finish primary school without repeating courses), low coverage (13.5 percent of school-age people could not access education), and high illiteracy (11.5 percent of people over 15 years of age could not read or write, which increased to 18 percent in rural areas)118. Gender inequalities also played a role in this dynamic119. As can be seen in the case of

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115 ENHOGAR survey 2019.
Mexico, in 2018, 48.6 percent of poor female-headed households had an educational gap, compared to 39.5 percent of poor male-headed households.

1.4. Social cohesion and violence

Social cohesion, understood as a necessary condition to achieve the 2030 Agenda, together with community resilience, is one of the five critical pillars of the UN’s strategy for the immediate socio-economic response to COVID-19 (embodied in the Socio-Economic Response Plans).

The socio-economic effects caused by the COVID-19 pandemic have worsened existing inequalities in the region generating new social tensions. This exacerbates the manifestations of social conflict already present in the region due to a general discontent felt by citizens. Several countries imposed strong measures to contain the pandemic that limited social dialogue and democratic participation. As a result, there is an increased distrust in institutions and governments, and among individuals. The degree of effectiveness of governments’ responses is indicative of the challenges in managing and implementing public policies at the national and at the regional level, as well as in coordinating between different government levels. These aspects, together with the lack of accountability, increased the social tensions already existing in Latin America.

In addition to the social unrest present in the region, LAC countries were also struggling with all kinds of lethal and non-lethal violence. LAC is not only the most violent region in the world in terms of homicide rate, but also, has higher rates than countries with similar levels of inequality based on the Gini coefficient (RHDR 2021).

There is a vicious impact of violence on poverty and low growth. As inequality can trigger violence, violence also increases inequality because the most vulnerable are often those who experience it the most. Thus, it increases and perpetuates poverty through indirect impacts on labour participation, reduced access to education, lower participation in decision making, and negative impacts on health, among others.

Country-level SERP reports from Brazil, Colombia, Mexico, and El Salvador provide evidence of an increase in levels of discrimination, violation of human rights and social tensions throughout the region. In Brazil, reports from civil society organisations suggest the intensification of racism and racial discrimination. In Colombia, there has been stigmatisation and a significant increase in threats and attacks against health professionals. Discrimination against migrants is particularly evident in Mexico where returning Mexican people and foreigners in transit or settled in Mexico, face high rates of exclusion and discrimination. This is also the case of indigenous populations who are discriminated against mainly because of language barriers: local authorities, in general, do not understand the indigenous languages, which means there is no information delivered to these communities regarding public social programmes or human rights, nor are there available mechanisms of participation.

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120 UN Brazil (2020). UN Framework for the Socio-Economic Response and Recovery to COVID-19, p.34
These conditions reinforce their marginalisation and prevent them from fully enjoying their human rights. Similarly, in Brazil, “indigenous and quilombola (Afro-Brazilian) leaders raised concerns about the lack of mechanisms for their communities to apply for COVID-19 emergency income aid provided by the federal state. Related information on this matter is also lacking in rural and forest areas.”

The assassination of social leaders shows an increase in human rights violations. In Brazil, for example, at least eight human rights defenders were murdered from the beginning of the pandemic until June 2020. Between 21 March and 12 May 2020, the Office of Human Rights Defence in El Salvador registered 1,337 cases of human rights violations linked to COVID-19 health emergency situations.

In Honduras, by July 2020, the Office of the United Nations High Commissioner for Human Rights registered 417 civil protests in the country, which was more frequent in the poorest communities.

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**Box 4. The links between violence, inequality and productivity**

Greater inequality may foster conditions for more violence through three distinct channels. First, greater disparities are likely to introduce incentives that make a return to illegal activities comparatively more attractive than resorting to legal alternatives, especially if law enforcement is weak. Second, inequality engenders frustration and alienation among the dispossessed through perceptions of disadvantage, a lack of opportunity, and unfairness, which, all together, spur violence. In the absence of effective governance mechanisms to process them peacefully, tensions created by perceptions of unfairness that weaken and tear at the social fabric over time often result in violence or the threat of violence as a means of “exit”. When people perceive that the system is rigged in favour of a few (as is the case in LAC), they often lose faith in “being heard” as a means to reach and sustain new agreements. Third, inequalities in power, social status, and income make some population groups -such as women and ethnic minorities- particularly vulnerable to violence.

This chapter describes LAC governments' main responses implemented by July 2020, based on information provided by UNICEF and the International Policy Centre for Inclusive Growth (IPC-IG) (2020).

2.1. Social assistance

In general, all LAC countries implemented social protection measures to compensate for the fall in household’s income since the COVID-19 outbreak. According to Rubio et al. (2020), among the 24 LAC countries analysed, 20\(^{128}\) implemented new or existing conditional cash transfer programmes to protect the poorest population and expand vertically (higher transfers and/or additional number of transfers) and horizontally (new beneficiaries) to protect the vulnerable populations, mainly informal and self-employed workers.

In South America, Argentina, Brazil, Colombia, Chile, Paraguay, Peru, and Uruguay, existing cash transfer programmes were used. New temporary transfer programmes were also created (Figure 16). This was also the case for Costa Rica in Central America and Jamaica in the Caribbean. Among the countries that created new programmes and did not have existing ones, Bolivia, Ecuador, Honduras, and Dominican Republic targeted informal or self-employed workers. Panama, El Salvador, Bolivia, and Guatemala targeted their programmes to low-income families and Haiti to rural families.

Based on the data provided by UNDP-UNW Global Gender Response Tracker, several countries have implemented measures that target women’s economic security. In a total of 46 countries and territories in the LAC region, the tracker accounts for 167 measures of that kind (representing 22 percent of the total of social protection and labour market measures), implemented by 35 countries and territories. According to a study conducted by UNDP based on this data, new cash transfer programs with gender-sensitive designs successfully included women as beneficiaries. These programmes are innovative in the region as they recognise women’s basic right to earn their own income, moving away from the traditional role of women as simply mothers who are beneficiaries of cash transfers\(^{129}\).

Regarding food programmes, aside from Guyana, Mexico and Cuba, the rest of LAC countries used, adapted, or created food programs. Most of them consist of food baskets. Also, some countries like Paraguay, El Salvador, and Colombia adapted the distribution of

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\(^{128}\) By July 2020, only Cuba, Nicaragua, Suriname and Guyana had not used cash transfer programs.

school food programmes within families with children enrolled in public schools. Finally, it is worth mentioning how Colombia created an innovative program to refund the Value Added Tax (VAT) as a strategy to help poor families. The program consists of giving a fixed cash transfer of about US$20 ($76,000 COP) to poor families listed on the national poverty index score SISBEN as a strategy to protect their consumption capacity.\(^{130}\)

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**2.2. Access to public services and VAWG response**

To facilitate access to public services like electricity, water and sanitation, some countries opted for subsidies to service rates. Others offered flexible payment methods, eliminated tax charges, or guaranteed uninterrupted provision of the services. The Internet became an essential service during the pandemic, and some countries made additional efforts to procure access. Colombia, for example, not only provided uninterrupted internet service, but also froze the service rates and eliminated its tax charges. El Salvador, Venezuela, and Cuba also provided uninterrupted internet service, and Argentina launched a program to ensure digital connection to poor neighbourhoods.

The programmes that aim at providing family and psychosocial assistance rely mostly on creating helpline support. For domestic violence situations, Costa Rica, Peru, Uruguay, and Mexico adopted alternative mechanisms to the existing ones to facilitate victims support during periods of isolation. For example, Costa Rica reinforced women's care through virtual media and telephone attention by creating the Psychological First Aid for Families in the Time of COVID-19 programme and defined inter-institutional coordination to provide care for migrant minors.

According to the Global Gender Response Tracker, 66 percent of the VAWG measures taken by countries in the region aim to strengthen services for women survivors, including:

- psychosocial support, helplines, and other mechanisms of this nature. For instance, Barbados, Guyana, Peru, Dominican Republic expanded their helplines or created new ones; Colombia, Bolivia, and Chile established a mechanism for women to report violence and seek help at pharmacies; Perú and El Salvador have centres to offer psychological and mental health support.

- improved police and judicial response time. For instance, Panama created an intersectoral group with the Ministry of Health, the Prosecutor’s Office, the Police, and the Judiciary to respond to violence against women; Costa Rica strengthened patrolling and home visits in areas of known situations of violence; and

- shelters identified as essential services (Argentina, Colombia, Dominican Republic, and Cuba).

\(^{130}\) For more information see [https://devolucioniva.prosperidadsocial.gov.co/](https://devolucioniva.prosperidadsocial.gov.co/)
In addition, countries adopted communication campaigns to raise awareness on domestic and gender violence, and to disseminate information about programs and available services. Finally, eight countries worked on improving the use and collection of information on violence against women. Mexico, for example, created a working group to design a set of indicators to timely monitor violence against women.

### 2.3. Social security and labour market

The most frequent instruments used to contain the economic effects of the physical distancing measures were those to support employment, anticipated disbursements of severance payments and other salary benefits. The different responses are mainly designed to protect formal employment, economically support MSMEs and compensate informal workers’ income losses.

Given the high informality rates in LAC, social security measures reached only a small proportion of workers. According to Amorim et al. (2019)\(^{131}\), unemployment insurance coverage is close to 12 percent in LAC. Only few countries have this kind of mechanism (8 countries). A greater number (10 countries) do not have any kind of protection mechanism in the event of unemployment. In response to the economic emergency, Argentina, Mexico, Chile, Colombia Uruguay, and Ecuador adapted existing unemployment programmes, either to ease the conditions of access, to increase the period of time allowed to receive the benefit, to increase its amount or to extend its coverage to other types of beneficiaries (Figure 16). Regarding the latter, Uruguay included in the special regime of unemployment subsidies only the dependent workers of some of the economic sectors most affected by the pandemic contention strategies at first\(^{132}\). However, given the high impact of the pandemic on the economy, the special regime was expanded to all economic sectors less than a month after the measure was launched\(^{133}\).

However, some countries used contributory pension programmes as a mechanism to protect individuals’ income: Argentina offered higher payments; Belize, Brazil, Costa Rica, Guyana, and Mexico authorised anticipated payments; Cuba and Venezuela authorised additional payments; and Chile and Peru allowed extraordinary pension withdrawals.

A significant percentage of measures aim to give financial support to businesses in economic distress and protect employment in the short run. As such, response measures to support MSMEs involved authorisation for temporal contract suspension, subsidies to salaries, anticipation of vacation periods, reduced working hours, reduced salaries, and teleworking. Regarding subsidies to salaries, this measure was widely implemented in the region. In the Caribbean countries, it was concentrated in key economic sectors like tourism. In addition, some countries defined new regulations regarding postponement or reduction of employers and self-employed workers contributions to social security. In some cases, these temporary measures were not implemented together with financial

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support to MSMEs. Thus, the measures implemented ended up affecting workers’ income. Finally, governments created special credit lines to support MSMEs.\textsuperscript{134}

\begin{table}[h]
\centering
\begin{tabular}{|l|c|c|c|c|c|c|c|c|c|c|c|c|c|}
\hline
 & SOUTH AMERICA &  & MEXICO AND CENTRAL AMERICA &  & CARIBBEAN &  &  &  &  &  &  &  \\
\hline
 & ARGENTINA & URUGUAY & PARAGUAY & CHILE & BOLIVIA & BRAZIL & COLOMBIA & ECUADOR & PERU & VENEZUELA & SURINAM &  \\
\hline
SOCIAL ASSISTANCE &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Use and/or adaptation of existing cash transfer programs &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Creation of new cash transfer programs &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
VAT refund &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Use and/or adaptation of existing food programs &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Creation of new food programs &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
ACCESS TO SERVICES &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Subsidies for public services (water, electricity, internet) &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Family & psychosocial support services &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Subsidies for housing &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
SOCIAL SECURITY &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Unemployment insurance &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Adaptation of pensions system &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Advance payment of severance payments and other salary benefits &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Health insurance &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Sick leave &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Support to self-employment &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
LABOUR MARKET &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Employment protection measures &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Support to MSMEs &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Teleworking &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Tax reduction &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
Reduction of working hours &  &  &  &  &  &  &  &  &  &  &  &  \\
\hline
\end{tabular}
\end{table}

\textsuperscript{134} Although these measures are specifically targeted to MSMEs, there is evidence of access barriers to the financial products due to difficulties imposed by financial institutions regarding collaterals.
The UN system response included the joint work of 40 UN Development System entities. The UN’s key components to respond to the crisis (by saving lives, protecting societies, and recovering better) are: (1) the socio-economic response, led by UNDP, (2) the health response, led by the World Health Organization, and (3) the humanitarian response, led by the Office for the Coordination of Humanitarian Affairs.

As part of the UN system response, the UN Secretary-General issued policy briefs to provide ideas to governments worldwide on how to address the consequences of this crisis. Figure 17 and Figure 18 summarise the key messages of these documents:

Figure 17. Key messages of the Secretariat General’s policy briefs on COVID-19 by theme

1. HUMAN RIGHTS
   - A human rights right lens on COVID-19 response ensures better outcomes for everyone
   - Health responses should be sensitive to unintended socio-economic impacts
   - A threat to one is a threat to all: do not discriminate or leave anyone behind
   - Inform people and be transparent for more impact
   - Emergency measures must be necessary, reasonable time-bound and proportionate
   - National solidarity is essential
   - A recovery that respects human rights will get us closer to the SDGs and a better world

2. INEQUALITY (MANDELA LECTURE)
   - COVID-19 has laid bare deep structural inequalities worldwide that define people’s life chances
   - Climate change and digital transformation risk widening inequalities further
   - We need a new social contract that creates equal opportunities and respects rights
   - This includes a new generation of social protections and safety nets
   - Education and digital technology must be enablers and equalizers
   - Shift the tax burden from payrolls to carbon and ensure that everyone pays their fair share
   - A new global del is also need it based on fair globalization and rights
   - Take into account nature and future generations
   - Measure success in human rather than economic terms
3. SHARED RESPONSABILITY; GLOBAL SOLIDARITY

- Protect and strengthen health services
- Help people cope with social protections and continuing basic services
- Protect jobs, informal workers and small businesses
- Make fiscal stimulus work for the most vulnerable
- Prioritise social cohesion, resilience and community-lead responses

5. FOOD SECURITY AND NUTRITION

- COVID-19 may send millions into acute hunger and extreme poverty
- Focus on where the risks are most acute to save lives
- Strengthen social protections and safeguard access to food
- Invest in transforming food systems with a shift towards more sustainability

7. EDUCATION

- Education is a human right and bedrock of just, equal and inclusive societies
- COVID-19 disruption may have lasting impacts
- Reopen school safely, listen to all stakeholders
- Protect the education budget in national budgets
- Build flexible, equalitable, resilient education systems
- Changes and innovation in learning should be accelerated and inclusive

9. TOURISM

- One of the world's biggest economic sectors with millions of lives and livelihoods affected
- Recovery as an opportunity to rethink tourism and its impact on people and nature
- Cushion the impact on livelihoods
- Reopen safely with people and the centre
- Build a more resilient, innovative, sustainable and fair sector for the future

4. DEBT

- Debt relief should be based on vulnerability not income
- Consider an across-the-board debt standstill for countries in need
- More options for debt sustainability
- Address structural issues in the international debt architecture

6. THE WORLD OF WORK

- An unprecedented drop in employment, even as some sectors successfully shifted online
- Worst-affected sectors disproportionately employ women
- Provide immediate support of at-risk workers, enterprises, jobs and incomes
- In reopening, provide safe workplaces
- Pursue a recovery with better jobs for all through a human-centered, green and sustainable, inclusive approach

8. CITIES

- Cities are the epicentre, not because of density per se but choices about how people live, work and travel
- Cities are also hubs of resilience, Innovation and solidarity in COVID response
- Tackle inequalities and long-term development deficits
- Strengthen the capacities of local governments to keep services going
- Built on innovations and pursue a green, resilient and inclusive economy recovery

10. MENTAL HEALTH

- The COVID-19 crisis has caused wide psychological distress
- Address mental health in response plans
- Ensure widespread availability of mental health support
- Built mental health services for the future and include mental health in universal coverage

11. PEOPLE ON THE MOVE
- COVID-19’s harsh impact on refugees, IDPs and migrants contrasts with their outsize role in many economies (e.g. as health and food workers)
- Include refugees, IDPs and migrants in responsive plans
- Protect their human rights
- No-one is safe until everyone is safe -provide humanitarian assistance-
- They are part of the solution leverage people’s full potential

12. WOMEN
- Women bear the brunt of the crisis in forms such as increase in unpaid care needs and in rates of domestic violence
- Women are also the backbone of recovery Include and place women at the centre of both response and recovery efforts
- Designate domestic violence shelters as essential services and move support services online
- Socioeconomic response plans should intentionally focus on the lives and futures of women and girls
- Work towards inclusive and equal economies that take account of unpaid care work, enable women’s increased labour force participation and close the gender pay gap

13. CHILDREN
- COVID-19 could have lasting impacts on children’s education, nutrition, safely and health
- Harmful effects will impact the most vulnerable disproportionately
- Minimize the impact of physical distancing and lockdown strategies on children
- Prioritize the continuity of child-centred services
- Provide practical support to parents and caregivers

15. PERSONS WITH DISABILITIES
- COVID-19 has hit persons with disabilities especially hard not only in terms of health
- It has also intensified their challenges with access and inclusion
- Combine mainstreamed and disability-specific measures across COVID response Ensure accessibility of information facilities, services and programmes
- Meaningfully consult and include persons with disabilities
- Establish accountability and commit to investments that support disability-inclusive outcomes

14. OLDER PERSON
- Tackle health crisis without discriminating on the basis of age
- Reduce social isolation during physical distancing
- Include their needs and rights in response plans
- Ensure they participate in decisions that affect them
- Don’t overlook their enormous contribution to society
- Considered that the majority of older people are women

19. LATIN AMERICA AND THE CARIBBEAN
- Transform the region’s development model
- Take immediate measures, such as emergency basic incomes and anti-hunger grants
- Expand the multilateral response to all LAC countries, including potential debt relief, concessional funding, trade exemptions and humanitarian assistance
- Aim for low-carbon growth with decent jobs and universal social protection

Source: Taken from UN (2020). United Nations comprehensive response to COVID-19. Saving lives, protecting societies, recovering better. Pg. 44
“By July 10th, 2020, 30 countries of the region had implemented 199 social protection measures providing support to poor and vulnerable individuals and households, among which 108 measures consisted of cash transfers in 29 countries. These measures vary widely in terms of their scope, target population and level of sufficiency.”

At the country level, through the Socio-Economic Response Plans (SERP), the UN Country Teams, under the coordination of the UN Resident Coordinator and often with UNDP’s leadership, prepared a response plan based on the five pillars of the COVID-19 response: (1) health, (2) protection of people: social protection and basic services, (3) economic response and recovery, (4) macroeconomic response and multilateral collaboration, and (5) social cohesion and community resilience. Given the comprehensive extent of the UN system response, the SERPs include, among others:

i. reinforcing existing surveillance systems to enable monitoring of COVID-19 transmission
ii. protecting enterprises, jobs, and income
iii. giving special attention to vulnerable workers in the informal sector and to small and medium-sized enterprises
iv. promoting the recognition, reduction, and redistribution of unpaid care work
v. promoting social cohesion and building trust through social dialogue and participatory processes
vi. strengthening national and local capacities
vii. promoting inclusive social dialogue for socio-economic recovery in affected communities, and
viii. addressing impacts of the crisis regarding access to quality educational services.

The UN’s COVID-19 socio-economic response dashboard provides a big picture of the results for each of the five pillars. For the first pillar, health first, as can be seen on the left side of Figure 19, there have been close to 12 million beneficiaries in LAC, most of them through maternal health services (5.3 million), followed by vaccination programmes (4.1 million) and nutrition programmes (2.3 million). Also, approximately 121 thousand health workers have been supported through the provision of personal protective equipment (PPE) and building capacity Risk Communication and Community Engagement (RCCE) (Left side of Figure 19).

In the second pillar, as can be seen in Figure 20, close to 63 million people benefited from (UN supported) social protection schemes: 38 million through financial aid packages, 8 million through psychosocial support, 8 million through food and nutrition, 4 million people through Water, Sanitation and Hygiene (WASH) programmes, and another 4 million from legal aid, human right protection and cash transfer programmes.
Almost 5.3 million people benefited from the UN economic responses implemented in LAC, where 3.1 million are workers, both in the formal and informal economy, and 2.2 are beneficiaries of food supply protection regimes. Among the supported companies, the vast majority, 139 thousand, are SMSEs, while only 8 thousand correspond to private sector companies excluding MSMEs. Regarding the UN-supported policies in LAC countries, in 13 percent of countries the employment policies for informal workers and women were completed.

Under the macroeconomic responses, data show that 12 countries in LAC conducted Socio Economic Impact Assessments (SEIA) and a quarter of them used their results to produce evidence-based policies (Figure 22).
Finally, under the fifth pillar of social cohesion and community resilience, Figure 23 shows that 2,035 organisations (58 percent employer organisations and 42 percent trade unions) were supported through institutional capacity building so that governments together with the employers’ and workers’ organisations can work hand in hand to shape socio-economic policy responses. Close to ten thousand community organisations were trained for resilience, among which 53 percent correspond to indigenous organisations. The support to community organisations to build resilience includes capacity building to respond to and mitigate impacts such as those related to domestic violence, racism, xenophobia, stigma, and other forms of discrimination; prevent and remedy human rights abuses; and facilitate social dialogue, advocacy, and political engagement spaces with the participation of at-risk populations and groups.

Source: Taken from https://data.uninfo.org/ Information retrieved by April 2021

UNDP’s integrated response to COVID-19 focuses on three main priorities: (1) health systems support, (2) multi-sectoral crisis management, and (3) socio-economic impact assessment response. Within the first one, UNDP has most frequently supported and given technical assistance for the procurement of medical supplies and Personal Protective Equipment (PPE). It has also given support in adopting technology-based and innovative measures to expand long-distance care (telemedicine) and in strengthening the provision of health coverage for the most vulnerable populations.

On the inclusive and multi-sectoral crisis management, UNDP allocated resources “across 47 countries to help the government maintain businesses continuity and to plan, coordinate, communicate and finance their crisis response”137. Specifically, UNDP has supported planning processes for policy design, established partnerships with the private sector to boost

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137 UNDP (2020). UNDP’s 2.0 response, Beyond Recovery: Towards 2030
entrepreneurship, and promoted employment generation and digital capacity strengthening within MSMEs with the purpose of generating new businesses and value chains. In several countries in the region, UNDP is working in collaboration with other agencies to support the development of digital platforms to coordinate and articulate responses to the pandemic. Likewise, UNDP is engaged with other agencies to develop policies and programmes aimed at reducing gender-based violence.

UNDP has mobilized new funding from partners and repurposed a significant number of resources in program funds to support governments’ responses to the pandemic through a new Rapid Response Facility (RRF). “Of the initiatives supported through the RRF, 40 percent include a focus on gender, 26 percent a health system support role, 32 percent an SDG integration role and 44 percent a governance strengthening function. The support from 130 countries includes 79 percent of the Least Developed Countries (LDCs), 78 percent of countries classified as fragile, and 64 percent of Small Island Developing States (SIDS)."

Taking into account the multiple implications of social protection to promote inclusive and sustainable growth, reduce poverty and vulnerability of the population, and its fundamental role in responding to the socio-economic consequences of COVID-19 and building resilience, the UNDP Regional Hub for LAC provides a Social Protection Offer to countries. This offer brings together the tools, knowledge, and experience of its different thematic teams. In this way, the Regional Centre provides technical assistance in matters of social policy with a comprehensive, integrated gender-responsive and multidimensional approach to stop possible setbacks in the implementation of the 2030 Agenda.

The offer, which is also aligned with UNDP’s COVID-19 2.0 response, Beyond Recovery: Towards 2030, aims to offer immediate relief but also look beyond recovery towards 2030. It focuses on supporting more responsive and accountable governance by improving the governments’ managerial capacities, transparency, and accountability for results by investing in social protection relevant data generation, and management capacities with reliance on digitalization. The resilience component aims at reducing vulnerability at the individual, household, and community levels to manage risks and face crises with a higher possibility of recovering sooner and better and anticipating future shocks. Environmental sustainability is meant to take social protection into the domain of energy, natural capital and climate sustainability and explore how these two policy areas can reinforce one another.

In this way, the UNDP’s Regional Hub for Latin America and the Caribbean Offer supports national and local governments in producing Socio Economic Impact Assessments (SEIA) that define the priority actions for recovery. UNDP has supported the production of Human and Economic Impact Assessments (HEAT) for Anguilla, British Virgin Islands, Barbados, Dominica, Antigua and Barbuda,
Grenada, St. Lucia, and St. Vincent and the Grenadine. It includes the design and measurement of multidimensional poverty and vulnerability indexes, the Interagency Social Protection Assessment tool (ISPA), the Social Protection and Gender Equality Floor tool, and the design and analysis of policies and National Systems of Care. Finally, as a complementary initiative, UNDP is working on the design of the Informal Sector Facility, a platform that aims to tackle poverty and inequality by promoting the transition to formal economies and promoting better conditions for informal workers.

The COVID-19 crisis is an opportunity to build better and recover the pathway towards achieving the 2030 Agenda for Sustainable Development. This means undertaking structural reforms and integrated responses in four main areas: governance, social protection, digital disruption, and green economy.
Due to the COVID-19 outbreak, LAC countries find themselves in a vulnerable position on several dimensions. First, health response capacities are insufficient: health systems in the region are overburdened with persistent health challenges, and are characterised by structural inequalities regarding access, especially among rural and indigenous communities, low investment, and a high presence of comorbidities in the general population. The reduction of diagnosis and treatment of other diseases, as well as the decrease in preventive health care related to sexual, reproductive, and maternal health, are key issues in addition to the COVID-19-related response.

Implemented activity closures and movement restrictions to stop the spread of the pandemic have caused severe socio-economic impacts at the global level, such as rising unemployment, poverty, and inequality, worsening long-standing disparities in the region that jeopardise development gains and the achievement of the Sustainable Development Goals of the 2030 Agenda.

Latin America and the Caribbean was the region with the greatest economic contraction in 2020, estimated to be around 6.7 percent. It is one of the most affected in terms of infections and deaths. Given the nature of this crisis and the consequent closure of borders in most countries, the tourism sector is significantly hit, thereby affecting the economies of countries in the Caribbean and Central America where it represents an important contribution to the GDP.

Improving social protection systems’ architecture

The pandemic has made inequalities more visible and has deepened existent gaps. For instance, labour market impacts have affected the most vulnerable to a greater extent: poor population, women, young people, ethnic groups, migrants, and informal workers, among other groups. The impact on women is disproportionate, as they represent a considerable proportion of informal workers in LAC and are frequently employed in high-risk economic sectors. Traditionally excluded populations must be at the centre of public policies that increase social protection. Strategies to address informality need adequate tools to identify informal workers, understand the drivers for informality, design formalisation policies with a gender lens that adapt to specific territories, and also consider an ethnic and life-cycle perspective.
“The current architecture of social protection policy in the region can result in a problematic trade-off” (RHDR 2021). Social assistance programmes, for example, may induce beneficiaries to remain in informality in cases where the benefit (cash or in-kind) is delivered conditionally due to their informality status. Or it may create a poverty trap when programs are based on the conditions of being poor. “There is a clear need to improve social insurance and redistribute more towards workers who are informally employed, particularly if they are poor” (RHDR 2021). But it is important to work in the architecture of social protection programmes, which should be designed in a way that they do not encourage informality but, instead, generate the right incentives to promote transition into the formal economy or to remain in it.

Social protection is an indispensable part of the policy response to the current crisis: it enables people to effectively access health care and basic services while promoting job and income security for all. Health access and the quality of health services need to be improved to achieve universal coverage. For that purpose, deploying strategies for narrowing barriers of access to healthcare services due to geographical conditions, particularly important for rural and indigenous populations, is of the utmost importance.

Social protection increases resilience. It also helps prevent poverty, unemployment, and informality, and acts as a powerful economic and social stabiliser. In response to the economic impacts of the pandemic, LAC countries adopted a combination of measures aimed at protecting jobs, income, and businesses. Despite governments’ efforts to increase the coverage of social protection, resources are insufficient to provide adequate social protection for all. Thus, special efforts are needed to extend social protection to informal workers, poor populations, and other vulnerable groups.

Box 5. Social protection design needs attention

Informality constitutes a challenge because it limits the effectiveness of social protection schemes to cover workers against risks and circumstances that can compromise their quality of life. Informal workers are less well protected from risks and generally have access to lower-quality services concerning formal workers. In addition, poor informal workers face more difficulty escaping from poverty and, if they do escape, they are likely to fall back into poverty. Equally important, informality is closely associated with lower productivity, which is a critical factor in determining worker earnings and a critical factor in determining long-term growth.

But social protection outcomes will not improve by just increasing expending or expanding programs; it is the social protection design that needs attention. Policies and programs need a comprehensive logic to ensure that they work harmoniously together and complement each other.

Source: Based on UNDP (2021b). Regional Human Development Report (RHDR): “Trapped: high inequality and low growth in Latin America and the Caribbean”.

Achieving universal social protection systems

Social protection is an indispensable part of the policy response to the current crisis: it enables people to effectively access health care and basic services while promoting job and income security for all. Health access and the quality of health services need to be improved to achieve universal coverage. For that purpose, deploying strategies for narrowing barriers of access to healthcare services due to geographical conditions, particularly important for rural and indigenous populations, is of the utmost importance.

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The role of fiscal policy is key for crisis response (to implement counter-cyclical policies to safeguard the most vulnerable segments of societies and MSMEs), as well as for a sustainable recovery in line with the SDGs. As Latin America and the Caribbean region suffered from the biggest economic contraction in 120 years, the governments needed to implement fiscal stimulus packages to tackle the socio-economic impacts of COVID-19.

For the recovery period, it is important to channel resources to where they are needed the most, in an effective and efficient way, by safeguarding social spending. Smart investments can restore fiscal space in the medium-term and strengthen the governments' capacity to provide counter-cyclical support in any future crises. For instance, investments in strengthening health and education systems would contribute to reducing inequalities and increasing productive capacity. For the region, it is critical to increase social protection coverage and to promote the transition of informal workers and enterprises to the formal economy, which could also help increase the tax base. Efforts to diversify the economies, avoiding dependency on one sector, like tourism or on a few commodity exports, and investments in resilient and sustainable infrastructure would also increase the resilience of the economies and societies to future shocks.

Thus, in a longer-term period, to achieve universality of social protection systems it will be necessary to increase the tax burden “through higher taxes on income, property and activities harming the environment and through a reconsideration of special tax regimes; in some countries, also through higher consumption taxes or lower generalized subsidies, particularly for fuel and, in all, through lower evasion rates (which go hand in hand with less informality). The specific combination will differ across countries. But, over such routes, taxation could make three key contributions to social

Box 6. Towards universal social protection systems

The principle of universality -with respect to the relevant population- for social protection systems should be understood in three complementary dimensions:

- The entire population exposed to a given risk needs to be covered through the same programme.
- The source of financing should be the same for each programme, based on the type of risk covered.
- The quality of services provided by the programmes should be the same for all.

Under this principle, the poor population would have access to insurance under the same conditions as everybody else, including services of equal quality.

Social protection would contribute to phasing out the formal-informal segmentation of the economy, perhaps the single most important factor in the generation of exclusions and inefficiencies in LAC.

Source: Based on UNDP (2021b). Regional Human Development Report (RHDR). "Trapped: high inequality and low growth in Latin America and the Caribbean".

142 However, the fiscal support (as percent of GDP) has been uneven across the countries of the region, which overall faces decreasing revenues and fiscal space as well as increasing debt levels and debt sustainability challenges.
Big business owners in Latin America are partly responsible for maintaining an overall low tax collection by steering fiscal systems away from more progressive taxation through their political connections. This influence is exerted via their interference in tax reforms in ways ranging from blocking tax increases to business owners and compromising tax resources by pushing for exemptions and subsidies for their operations that crowd out redistributive spending.


In this regard, it will be important to deal with a complex political economy and address the imbalances of power that contribute to perpetuating inequalities and low growth. This is particularly important in a period of high unrest among the people because of unmet needs, low quality of basic services, distrust in institutions and a governance crisis. As stated in the RHDR (2021), “the concentration of power in the hands of a few who defend their private interests rather than the public good is one of the factors that connect high inequality with low growth because it often results in distorted policies that are short-sighted and inefficient and in weak institutions.” In sum, the report critically highlights how monopoly power and market concentration can translate into rent-seeking behaviours and, ultimately, into business political power. In the LAC region, this has led to multiple examples of economic elites interfering in policy design or implementation. In response to this interference, fiscal systems, competition policy, and market regulations have often been shaped to benefit a small group of citizens rather than the whole population. Economic elites have seldom used their political power to push for reforms that would put their countries on a development path, increasing welfare for all.

Fiscal policies must respond with sufficiency and scope. It also must provide adequate instruments to target beneficiaries (social registries), to cover individuals who work in the informal economy (actions unrelated to social security), to improve gender equality (social protection systems that are considered ‘gender-neutral’ often deepen inequalities) and to successfully deliver cash transfers to vulnerable and poor households (access to digital services and digital instruments). In a context of multidimensional vulnerabilities, derived from or before the COVID-19 crisis, improving national methodologies for gathering and processing data related to household socio-economic situations is recommended. For that purpose, UNDP has supported countries in the region to design and develop Multidimensional Poverty Indices (MPI) and Multidimensional Vulnerability Indices (MVIs) that can help countries
shed light on the priorities for short, medium- and long-term social protection policies, considering an intersectional approach that is sensitive to gender gaps and other persistent inequalities in the region.

It is particularly important that short-term measures to fight the pandemic can be re-designed and sustained for the recovery process. For instance, measures to protect women survivors of gender-based violence should not be interrupted when quarantines are lifted, but rather be strengthened to ensure the continuity of support services.

**Acknowledging social risk management as a key component of social protection**

Under scenarios of crises and considering the high vulnerability to disasters in the region, social risk management is a key component of social protection. This approach to social protection must pay special attention to the poor and vulnerable and be oriented to decrease their vulnerabilities to risks and shocks. Social protection can contribute to ensure a basic income, provide food security, and guarantee access to basic services.

**Providing financial aid for MSMEs**

Containment measures have also affected regular operations for Micro, Small and Medium Enterprises (MSMEs), which in turn have an important impact on employment and on households’ income. Thus, financial aid to avoid business closures and massive layoffs is necessary. Complementary measures, like those exposed in the second chapter that ultimately translate the impact to households’ income, should not be considered as they will end up widening pre-existing inequalities.

**Promoting gender-sensitive policies in different fronts**

Policies focused on women should move forward in three dimensions: home, work, and spaces in between. In each of these dimensions, governments, the private sector, and households and communities play a role. Under these considerations integrated policies should focus on: i) having cash transfer programs with a gender perspective; ii) promoting co-responsibility in executing domestic and care activities with a more balanced distribution of responsibilities within the household between men and women, including maternity and paternity leave; iii) preventing women and girls from being victims of any kind of violence; iv) strengthening care services to facilitate effective labour participation of women, including care solutions at the workplace; v) promoting life-long education; and vi) promoting women’s participation in policy design to increase female employment.143

VAWG attention and response services are considered essential services in crisis situations. They should maintain adequate funding at all times, as well as expanding the availability of shelters during the pandemic and implement specific monetary transfers for women who are victims of violence. These measures not only aim at

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143 PNUD (2020). El Coronavirus y los retos para el trabajo de las mujeres en América Latina. UNDP LAC C19 POS No. 18.
avoiding the recurrence of violence, but they also should promote the economic autonomy of women.

Regarding the impacts on women, the COVID-19 pandemic has revealed the current care crisis, which shows that measures must be taken. However, countries do not consider this situation as urgent in their response to the crisis. As of November 2021, out of the total 766 social protection and labour market measures taken in response to the crisis, the COVID-19 Global Gender Response Tracker registered only 33 that directly address unpaid care. This means that the unpaid care measures represent just 4 percent of the total social protection and labour market response in the region. This figure does not provide information on the scope of these measures but indicates that this is not a priority for most of the governments.

In this way, the COVID-19 crisis highlights the urgency of addressing the unfair social organisation of care in Latin America and the Caribbean. The building of comprehensive care systems is a key element for medium and long-term socio-economic recovery, as it has the potential to generate employment and facilitate other sectors of the economy to function properly directly and indirectly. It is recommended that the measures taken towards this horizon should be guided by the 3 “Rs”:

- **Recognise**: Make care work visible so that it is perceived as a key to the well-being of societies and to the functioning of the economy.
- **Redistribute**: Distribute unpaid care work and domestic responsibilities more fairly and evenly between women and men.
- **Reduce**: Support and cover basic care needs, and reduce the unpaid workload disproportionately borne by women in households.

The following measures are suggested to recognise, reduce, and redistribute the burden of non-remunerated care work that is primarily borne by women:

- Leave policies to take care of children, the sick and other dependents to mitigate the effects of the overload of remunerated and non-remunerated work.
- Additional bonuses, subsidies, and vouchers to hire childcare services for workers unable to telecommute. Adaptation of public, private and community care services to relieve the burden of care responsibilities of women, such as visits to care for children, persons with disabilities, older persons, and other care dependents, or the alert buttons for specialised care.
- Development of community-based time banks aimed at donating time for the care of others.
- Communication campaigns for the promotion of shared responsibility of parenting, domestic chores, and care work within the households.
Additional recommendations towards the implementation of care policies in the medium and long term are the following:

- Invest in care infrastructure, technology, and transportation systems that save time.
- Transform labour markets to allow a fair distribution of paid and unpaid care work, fostering social stewardship between families, state, market, and community.
- Integrate the care economy into the planning, design, and implementation of macroeconomic policies.

Guaranteeing universal access to basic services

Access to basic services, including decent housing, access to water and sanitation, and electricity, are essential to face the COVID-19 crisis and protect people’s lives. As an example, having potable water for hygiene and an adequate and safe sanitation system are the basis of COVID-19 prevention. The international community had already recognised the importance of ensuring access to basic services and accordingly committed to a specific target in the 2030 Agenda: “By 2030, ensure access for all to adequate, safe and affordable housing and basic services, and upgrade slums (SDG 11.1)”.

Despite improvements, Latin America and the Caribbean have pending challenges to be addressed regarding access to basic services. There are significant differences between and within countries and the coverage of access varies depending on different factors such as socio-economic status, geographic location, ethnicity, gender, age, and others. Moreover, the commercialisation of health, housing, education, drinking water, sanitation and other basic services tend to exclude the poorest population and can result in the violation of their human rights. For the duration of the pandemic, the following recommendations should be taken into consideration to protect the most vulnerable population:

- Ensure the provision of essential services such as water, electricity, and gas to families who are unable to pay the bills, as well as the provision of other services to guarantee digital and internet connectivity, teleworking, and other remote modes of working.
- Suspend time-bound payments for essential services such as electricity, gas, and water, to highly vulnerable families and groups.
- Lift suspension on essential services such as water, electricity and gas to the most vulnerable families and groups.
- Extend the coverage of essential services such as water, electricity, and gas in highly vulnerable and marginalized areas.
- Freeze taxes on essential basic services such as water, electricity, and gas.

In the medium and long term, a stronger partnership between national, regional, and local governments, international
organisations, private sector, and civil society is needed to guarantee universal access to basic services as a cornerstone of human development.

**Rethinking education systems so that no one is left behind**

The crisis poses great challenges for education systems in the region. At the same time, it provides an opportunity to reflect on the school system, the fundamental role of teachers, and the use of technology to foster learning. The aim is to build a solid system that drives the quality of education for all children and adolescents in the region considering the unequal access to internet connectivity. Special measures need to be designed for children and adolescents that dropped out of school or suffered from school-lag during the past year. Their mental health needs to be addressed as well.

**Putting social cohesion at the centre and building a new social contract**

Two factors strongly contribute to generating new social tensions and exacerbating manifestations of social conflict already present in the region due to a generalised discontent of its citizens: the reinforcement of existing inequalities in the region and the degree of effectiveness of governments’ response to the crisis. The challenges seen in the implementation of adequate responses revealed the governments’ limited capacities at the national and at the regional level. The latter, together with the lack of accountability, has increased institutional distrust, affected social cohesion, and has exacerbated a governance crisis in many countries. However, these challenges can be seen as an opportunity for governments to build a new social contract to restore trust in institutions by generating adequate responses positively perceived by citizens with accountability and transparency.

Governments will need to work on integrated policies to achieve social cohesion. These should include not only those related to reducing inequalities, increasing social protection, and building resilience among the poorest and most vulnerable populations, but also policies on transforming and modernising the public administration, strengthening accountability, conducting structural reforms to create fiscal space, and support the rule of law and human rights. They should also create policies to tackle discrimination, strengthen and create participation mechanisms for all segments of the population. Most importantly, they should build strategies to support alliances with the private sector and foster greener economies particularly addressed to those left behind.

Strengthening and improving governance will be a necessary task for recovery. This will require building a new social contract grounded on greater solidarity, based on human rights, transparent government and actions that bring people closer to the state. This will restore their trust in governments and institutions. Effective governance, capable of transforming intentions into actions, requires creating fiscal space and, simultaneously, developing inclusive, green economic recovery strategies all together. For this purpose...

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“public-private solidarity and partnerships will be critical to build resilient social protection systems that can mitigate shocks, create strategies for informal sector workers, and design a new generation of resilient, green jobs that support youth-led entrepreneurship”.

Finally, to better build forward and generate progress and growth, it is necessary to “address the imbalances of power between actors to foster conditions in which conflicts may be settled through peaceful rather than violent mechanisms.” (RHDR 2021). The RHDR (2021) highlights some priority areas to deal with the problem of violence (political, criminal, social and domestic), which has been present in the region for many decades now. Box 8 presents a summary of these policy recommendations.

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Addressing imbalances of power and violence in all its forms

Finally, to better build forward and generate progress and growth, it is necessary to “address the imbalances of power between actors to foster conditions in which conflicts may be settled through peaceful rather than violent mechanisms.” (RHDR 2021). The RHDR (2021) highlights some priority areas to deal with the problem of violence (political, criminal, social and domestic), which has been present in the region for many decades now. Box 8 presents a summary of these policy recommendations.

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Box 8. Policy priority areas for reducing violence

Independent and effective judiciary systems

Establishing independent and effective justice systems capable of safeguarding human rights, facilitating access to justice for all without discrimination and supplying transparent and objective services is key to reducing violence effectively. These systems must adequately respond to differentiated needs, for example, by building the capacity to tackle violence against women, LGBTI+ people, and ethnic groups.

New approaches to deal with illicit trade

In LAC, illicit trade is one of the principal causes of violence and the growth of powerful criminal organisations. Considering the decriminalisation and legalisation of controlled substances might help LAC to take a step forward in the fight against crime, violence, human rights abuses, and corruption. To meet sustainability objectives, the shifts in regulation should also aim to address illegal mining, deforestation, and land speculation, which are another source of violence under the management of illegal organisations.

Economic empowerment of marginalised groups

Economic marginalisation may render people additionally vulnerable to violence. In the context of domestic violence, promoting women’s economic empowerment is essential for reducing situations of dependency that may foster violence. This requires actions on multiple fronts, including recognising the labour involved on unpaid care and domestic work and reducing and redistributing it through, among other things, increased access to care services. Governments should also work on dismantling gender stereotypes that may reinforce inequality and violence.

Expanding mental health care for victims of violence

Violence-induced trauma transcends the purely psychological dimension. It blocks opportunities, damages networks, and shatters aspirations. It keeps victims from achieving their goals, overcoming the challenges they face, and enjoying the benefits of economic, social, and political participation. Health care provision and initiatives directed at victims must acknowledge the importance of mental health in the integral reparation of the afflicted.

Investing in social capital to reform local politics

When the voices of the powerful drown out the voices of the underprivileged, violence leads to the deterioration of the social fabric and democratic governance. The reform of local political landscapes requires that investments in social capital are directed at re-establishing social trust.
Box 8. Policy priority areas for reducing violence

Building statistical capacity for data on violence

Without accurate data on violence, governments risk being unable to design and target adequate policy responses. Collecting better data on violence in the region will require a large, collaborative effort involving actors across sectors of society and at various levels, including multilateral organisations that can promote cross-country collaboration on data collection initiatives.
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