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# Gender dynamics in humanitarian leadership: navigating COVID-19 and beyond

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## Abstract

This paper explores the intersection of the impacts of COVID-19 on women and girls in humanitarian settings with the necessity of incorporating female perspectives in decision-making roles within multilateral institutions delivering humanitarian aid. Women remain underrepresented in leadership positions in these multilateral institutions. However, increased female participation in leadership roles is linked to greater consideration of women's needs in humanitarian response plans, thereby promoting gender-sensitive recovery efforts. Given COVID-19's exacerbation of preexisting gender disparities in fragile settings, gender-responsive relief measures are crucial in humanitarian contexts. With the rising demand for humanitarian aid, prioritizing gender-sensitive and inclusive responses is essential for fostering an equitable and resilient post-COVID-19 future.

**Keywords** Humanitarian sector, Humanitarian aid, Leadership, Women, Girls, Gender equality, COVID-19, Multilateral organizations

## Introduction

In recent years, an increasing number of people have been impacted by disasters, leading to a growing demand for humanitarian aid (Beisou & Van Wasnhove, 2020, p. 135). The outbreak of the COVID-19 pandemic in early 2020 exacerbated the already fragile situation in humanitarian settings (Sharma et al. 2020, p.1). By 2021, the number of people in need of humanitarian assistance and protection had reached 235 million, marking the highest number in decades (OCHA 2022, p. 9). Notably, the global health crisis disproportionately impacted women and girls in these settings, deepening preexisting gender-based inequalities, and thereby impeding progress towards achieving SDG 5 which relates to gender equality (United Nations 2020). Despite efforts at local, national, and global levels to swiftly address the impacts of COVID-19, "the pandemic magnified gender-based disparities faster than

governments, multi-national organizations, and the humanitarian sector could respond." (Asi et al. 2022, p. 13). This pivotal moment with unprecedented circumstances provides a unique opportunity to examine who is leading crisis response efforts in the humanitarian sector and the potential impact of their gender on these efforts. The global health crisis brought challenges and possibilities for women to the forefront of the global humanitarian agenda more prominently than ever before (Goryunova & Madsen 2024, p. 2), underscoring the timeliness of conducting research on gender dynamics in leadership roles in the humanitarian sector. Within this sector, it is particularly relevant to examine the leaders of intergovernmental organizations, given their crucial role in coordinating and providing assistance to populations in humanitarian settings. In addition, they often set standards, formulate guidelines, and devise policies for humanitarian action that have global legitimacy (Beigbeder 1991, p. 20). Thus, this article seeks to answer the question: *How does the COVID-19 pandemic underscore the importance of women's representation in leadership roles within intergovernmental*

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*organizations in the humanitarian sector, particularly in ensuring gender-responsive relief and recovery efforts?*

While substantial research on the gender gap in political leadership positions, such as national governments and parliament positions (Reifen-Tagar & Saguy 2021; Bullough et al. 2011; Hoyt 2010), as well as in business leadership, such as in corporate boards and senior management positions (Goryunova & Madsen 2024; Kroska & Cason 2019), exists, scholarly attention to female leadership in international organizations remains limited (Haack & Karns 2023, p. 140). Similarly, there is a dearth of research on women's leadership in the humanitarian sector (Patel et al. 2020, p. 11). Thus, this article examines gray literature in addition to academic sources to investigate how COVID-19 highlighted gender disparities within the humanitarian sector. Moreover, given the constraints in data availability, this research primarily serves as a foundational study upon which future research can expand to further investigate the links between female representation in decision-making and the implementation of gender-sensitive relief and recovery efforts.

The article is divided into three main sections. The “From data to theory: understanding the imperative of women's representation in global institutions” section establishes the underrepresentation of women in multilateral institutions and lays the theoretical foundation of the paper, emphasizing the significance of women's involvement in decision-making roles, especially within these institutions. The “COVID-19, women leadership, and gender inequalities in humanitarian settings” section situates the gendered impacts of COVID-19 in humanitarian settings within this framework. The “Reshaping humanitarian response: addressing gender disparities and power dynamics in crisis responses” section concludes by reflecting on the necessity for the humanitarian sector needs to address power imbalances that hinder women's access to leadership positions, thereby obstructing equitable and effective aid delivery, as highlighted by experiences during the pandemic.

### **From data to theory: understanding the imperative of women's representation in global institutions**

To begin, this section illustrates the underrepresentation of women in leadership positions in global institutions using recent data. Building on this, it delves into the theoretical foundations that highlight the significance of women's participation in these positions, before illustrating the far-reaching consequences of underrepresentation of women in leadership positions specifically within multilateral organizations.

### **Female underrepresentation in leadership positions in global institutions**

The humanitarian sector is made up of a diverse range of actors, including but not limited to community-based organizations, national governments, international non-governmental organizations, and intergovernmental organizations such as United Nations (UN) agencies. The UN is widely recognized as the world's leading humanitarian organization (Patel et al. 2020, p. 9). As part of the Beijing Declaration and Platform of Action, adopted by 189 Member States in 1995, signatories committed to promoting active women leadership and equal gender representation within the UN (Haack et al. 2020, p. 363). In 2017, the secretary-general called for strengthened efforts to reach gender parity at all levels in the UN System by 2028. While UN Women has reported improvements in terms of gender parity within the UN system, the highest concentration of women still exists at the entry level, where they constitute 70% of the staff (United Nations 2022). At more senior decision-making levels, women are underrepresented, only representing 37% of the staff, leading to UN system leadership predominantly being a “men's club” (Haack & Karns 2023, p. 149). In the humanitarian sector of the UN, recent data reveals that out of the 37 current humanitarian coordinators (the senior-most UN official in a country experiencing a humanitarian emergency), only 10 are women, accounting for merely 27% (IASC 2024). Across the whole humanitarian sector, though women are estimated to constitute more than 40% of half a million frontline workers, providing lifesaving assistance in emergencies and disaster zones, they are still drastically underrepresented in most senior leadership positions of the sector (Patel et al. 2020, p. 2). These same patterns of gender disparity in leadership positions could be observed in COVID-19 global task forces (Van Daalen et al. 2020, p. 1). For example, only five women were invited to join the WHO Emergency Committee on COVID-19, thereby constituting less than 25% of the 21-person group (Women in Global Health 2020, p. 5).

### **Advancing women's representation in leadership**

After establishing the underrepresentation of women in leadership positions in global institutions, it is pertinent to examine theoretical underpinnings that highlight the significance of women's participation in these positions. Enhanced representation and involvement of women in leadership positions can elevate women's concerns to the forefront of the global agenda, as well as lead to more inclusive, diverse, and representative decisions (Patel et al. 2020, p. 4). Research in global health has shown that when women are included in decision-making positions,

they are more inclined to raise human rights and development issues, recognizing the structural inequalities within peace and health sectors that contribute to disparities in outcomes (Hawkins et al. 2022, p. 44). Data from the Global Response Tracker shows that on average, countries with more equal gender balance in their parliament adopt significantly more gender-sensitive measures than those with an unequal gender balance (UN Women 2022a, b, p. 26). Further evidence from the development sector indicates that increased diversity and inclusion leads to macroeconomic growth, efficiency, and improved overall regulation (Patel 2020, p. 4). Beyond humanitarian and development settings, the inclusion of female and diverse perspectives has been shown to benefit decision-making processes, through “the disruption of groupthink, the introduction of novel viewpoints, a higher quality of monitoring and management, more effective risk management, and robust deliberation” (van Daalen et al. 2020, p. 13). Moreover, the expansion of perspectives and enhanced creativity and innovation are some of the advantages of equal gender representation in decision-making positions (Profeta 2017, p. 34).

#### **Repercussions of gender disparity in leadership positions: implications for intergovernmental organizations and global gender equality**

The consequences of the underrepresentation of women in decision-making positions in multilateral organizations are even more profound. Global institutions are powerful players in norm setting, benefiting from global legitimacy and representing the diversity of the world’s population. Meagher, Singh, and Patel (2020, p. 3) emphasize the pivotal role of these institutions in establishing women’s rights and gender equality as a global norm. However, the prevailing standard of male overrepresentation in decision-making positions in global bodies (such as the UN) perpetuates a biased norm. Challenging this norm through equal gender representation in these institutions would send a powerful signal on a global level, as multilateral institutions represent the voices of the international community. Increasing the presence of females in leadership roles within intergovernmental bodies would reshape perceptions of leadership, which are still predominantly viewed as being a man’s domain (Haack 2014, p. 2). The underrepresentation of female leaders perpetuates a harmful cycle where women’s perspectives are marginalized, which further entrenches the belief that women are unsuitable for roles, particularly in decision-making capacities (Visser 2011, p. 16). This detrimentally affects the status of women in society, thereby adversely impacting women worldwide. When women’s voices are included in bodies representing the international community, it sends a clear message that issues

affecting women cannot be overlooked (van Daalen et al. 2020, p. 1). Moreover, it serves as a signal that women are no less capable of making important decisions than men.

In this context, it is noteworthy to mention the varying manifestations of traditional gender roles across different regions worldwide. The COVID-19 Global Gender Response Tracker developed by UNDP shows that in Europe, North America, Australia, and New Zealand, women comprise 33% of the COVID-19 taskforces, while in Central and Southern Asia, they only constitute 12%. The global average of women in COVID-19 task forces stands at 24% (UNDP, 2022, p. 23). Various researched explanations shed light on why some countries have more female leaders than others, encompassing disparities in values, strength of norms, and gender roles (Min Toh & Leonardelli 2012, p. 605). As Emrich, Denmark, and Hartog (2004) argue, “One of the most fundamental ways in which societies differ is in the extent to which each prescribes and proscribes different roles for women and men” (p. 343). While women are still underrepresented in leadership positions across all countries, these cultural differences profoundly influence the accessibility of leadership positions for women, depending on the cultural context they originate from. This presents an additional challenge for multilateral institutions, which not only must acknowledge the different deeply rooted cultural practices limiting female empowerment but also take proactive steps to challenge these norms, setting an example of a united international community committed to promoting equal treatment of genders. Nonetheless, the multilateral system with its declarations, conventions, and commissions has provided a key voice for women’s rights in the past (Meagher, Singh & Patel, 2020, p. 3). Ensuring women’s participation in key intergovernmental decision-making bodies presents a further way for how the multilateral system could profoundly advance women’s rights globally.

This section has laid the theoretical groundwork, emphasizing the importance of women’s participation in decision-making positions, particularly within multilateral institutions. The subsequent section expands on these insights, examining the implications of the COVID-19 pandemic in this context.

#### **COVID-19, women leadership, and gender inequalities in humanitarian settings**

The primary rationale outlined in the literature advocating for increased female representation in leadership positions across various sectors is the association between increased women participation in leadership positions and heightened consideration of women’s needs (Bali et al. 2020; Meagher et al. 2023; Paffenholz 2018; van Daalen et al. 2020). The following section will relate

the impacts of COVID-19 on women and girls in humanitarian settings to the need for a female perspective in decision-making roles to ensure effective humanitarian relief and recovery efforts.

#### **Direct impacts of COVID-19 on women and girls in humanitarian settings**

From the onset of the COVID-19 outbreak, it became evident that the virus had a gendered impact, disproportionately affecting women and girls (Rani Saker et al. 2023, p. 1). With women comprising 70% of the front-line workers in the health sector globally, they face a heightened risk of exposure to the virus (WHO, 2021, p. 2). Additionally burdened as primary caretakers within households, women often assume responsibility for caring for sick family members or children, further enhancing their exposure to the virus (Wenham et al. 2020, p. 1). This increased unpaid care work forced some women to forgo paid employment, impacting their income. Further, movement restrictions, meaning the stay-at-home orders and limited access to group gatherings, escalated the risk of experiencing domestic violence and limit avenues for seeking help in safe environments (Utsa et al. 2021, p. 133). In sum, the outbreak of the pandemic and its immediate impacts revealed preexisting gender disparities and intensified these, endangering any progress made in the last decades in terms of gender equality (Protopsalti 2021, p. 26).

In the context of conflict settings, the gendered impacts of COVID-19 are exacerbated (Donovan 2022, p. 2). Swift and effective responses are particularly crucial in these fragile settings, characterized by limited resources and forced displacement (Lokot & Avakyan 2020, p. 40). The pandemic compounded existing challenges in healthcare delivery in conflict zones, where services are already strained, and often, basic needs are difficult to meet (Fuhrman et al. 2020, p. 1). Prevalent social norms in humanitarian settings also lead to women and girls being the last to receive medical assistance when they become ill, hindering their access to COVID-19-related care, such as testing and treatment (Fuhrman et al. 2020, p. 2). Moreover, systems of male hegemony often manifest in violence against women, which intensifies in humanitarian settings, as ingrained inequalities and norms are heightened and multiply in times of crises (Stark et al. 2020, p. 2). The increase in domestic violence during the outbreak of the pandemic was exacerbated by exposure to or threat of violence in public spaces (Donovan 2022, p. 4) For instance, conflict intensified in countries such as Afghanistan, Yemen, and the Democratic Congo in 2020, while West Africa witnessed a 50% surge in militia attacks compared to average monthly incidents (ibid). The Global Protection Cluster noted an increase

in gender-based violence due to the impacts of COVID-19 across 90% of the humanitarian contexts where it was active in 2020 (Global Protection Cluster 2020, p. 11). The COVID-19 pandemic also notably widened the gap between the current state of progress towards the Sustainable Development Goals (SDGs) and the targets set for 2030 (Beisou et al. 2021, p. 4343). Improving the situation of women in humanitarian settings as well as ensuring gender-balanced leadership relates to SDG 5, which focuses on gender equality and female empowerment (United Nations 2020). Ensuring effective humanitarian assistance is thus crucial to address the urgent needs of girls and women in conflict-affected areas, thereby achieving more progress towards the SDGs and ensuring a better and more sustainable future for all.

#### **Understanding the broader impact**

##### ***Indirect effects of COVID-19 on women and girls in humanitarian settings***

While response plans must address the direct impacts of public health crises in humanitarian settings, it is equally essential to consider the indirect effects. The World Health Organization (WHO) has previously highlighted that during past epidemics, the focus often shifted to emergency responses, resulting in the neglect of basic healthcare services and reduced access to these. Consequently, patients who need these services may avoid seeking them out of fear of contracting the disease (WHO 2018, p. 21). For instance, in the context of the Ebola outbreak which began in West Africa in 2013, it has been theorized that limited access to non-epidemic-related healthcare led to more deaths than the epidemic itself (McQuilkin et al. 2017, p. 934). The UNFPA estimates that up to 120,000 deaths could have resulted due to the absence of basic health care, where the scarcity of basic obstetric care was one of the areas of special concern (UNFPA, 2014, p. 3). Nonetheless, such impacts are often neglected in humanitarian response plans, as this suffering is not the direct result of the infection but secondary effects due to an overburdened healthcare system (Meagher, Singh & Patel, 2020, p. 2).

In the context of COVID-19, the issue of sexual and reproductive health (SRH) exemplifies how the secondary effects of pandemics can surpass the initial effects (Ryan and El Ayadi 2020, p. 1409). SRH-related issues are among the leading causes of death for women of child-bearing age, with 61% of maternal deaths occurring in countries in fragile settings (Tran et al. 2020, p. 760). The outbreak of the pandemic disrupted aid delivery and forced the reallocation of resources to address the immediate risk of the pandemic (ibid). However, women and girls depend on these services in humanitarian and fragile settings. Thus, while seemingly unrelated to COVID-19,

“sexual and reproductive health cannot be viewed as a luxury” (Tran et al. 2020, p. 761). Put more drastically, as Stark et al. (2020) argue, “the humanitarian community needs to stop assuming that lives saved from COVID-19 infection matter more than the lives impacted by inter-related factors, such as GBV (gender-based violence)” (p. 2). In many social contexts, SRH remains a taboo topic, due to decision-making power regarding contraception as well as societal expectations for women, dominant gender norms, and stigma regarding pre-marital sex and adolescent pregnancies (Lokot & Avakyan 2020, p. 41). Thus, the provision of services related to SRH by humanitarian organizations is paramount, and any disruption to them can significantly impede progress in establishing and maintaining them in the volatile settings of humanitarian operations.

Another example of a secondary effect can be observed in the Borno State in North-East Nigeria. The ongoing conflict between the government of Nigeria and non-state actors has led to disastrous living conditions, resulting in millions of internally displaced persons (IDPs), many of whom live in camps established by Borno State authorities (Usman 2021, p. 55). The Borno State government started closing IDP camps in 2021, forcing many civilians to either relocate or return to their areas of origin. Yet, this relocation was executed without ensuring that the new locations were suitable, as many areas still had limited access to services and inadequate livelihood opportunities (Global Protection Cluster 2022, p. 4). These areas are challenging for humanitarian actors to reach due to security concerns but also due to government-imposed movement restrictions implemented in response to COVID-19 (Niyi-Gafar & Adealaku 2022, p. 1). Thus, many humanitarian actors opposed these camp closures, as they could provide more assistance within the camps (ibid). However, women and girls have reported sexual harassment by security guards and Civilian Joint Taskforce members which are guarding the gate to these camps (Global Protection Cluster 2022, p. 9). This highlights the urgency of considering the specific vulnerabilities faced by women and girls, which may not directly stem from the contagious virus that caused the public health crisis.

Further, in this context, it is vital to recognize that delivering gender-responsive relief and recovery extends beyond merely categorizing women as “the most vulnerable” and therefore providing them with increased support. It entails understanding how gendered power dynamics and systemic inequalities shape the lives and experiences of women and girls (Lokoyot & Avakyan 2020, p. 42). For example, it is not the COVID-19 infection itself that increases GBV but rather gender-blind policies including stay-at-home orders which put many

women and girls at greater risk of GBV (Stark et al. 2020, p. 1). Thus, it is crucial to acknowledge that the impacts of global health crises, such as COVID-19, are interconnected with preexisting gender-based disparities. These intersections have been evident in previous health crises, such as the Ebola outbreak in the Democratic Republic of Congo (DRC) from 2018 to 2020, where a significant increase in GBV was observed (Stark et al. 2020, p. 2). Due to limited access to safe spaces during the outbreak, women and girls had fewer opportunities to seek help and distance themselves from their abusers (IRC 2019, p. 1). Nevertheless, the learnings of this were not adequately integrated into the humanitarian system, and the response efforts to COVID-19 overlooked these crucial GBV services, similarly as in the time of the Ebola outbreak (Stark et al. 2020, p. 2).

#### ***Data deficiency in crisis response plans***

As demonstrated, addressing the multifaceted gender impacts of public health crises like COVID-19 necessitates a response extending beyond immediate relief efforts. An integral component of this comprehensive approach and effective response involves robust data collection, encompassing disaggregated and informative data, particularly concerning the needs of women and girls in crises. The onset of COVID-19 underscored the heightened importance of data collection, as it became “critical more than ever” (Gazi & Gazis 2020, p. 75) in facilitating an adequate response. While humanitarian organizations encountered notable hurdles in adapting their data collection methods to remote strategies, the more overarching challenge lay in the insufficiently disaggregated data across various factors, such as sex, age, economic status, race, geographical location, and disability (Lokot & Avakyan 2020, p. 45). Merely 40% of the initial data collection efforts provided age and sex disaggregation (Aghajanian & Page 2020, p. 2). This data deficiency impedes efforts to grasp the pandemic’s impacts and risks marginalizing the concerns of vulnerable population groups, particularly women and girls, within crisis response frameworks (UN Women 2020, p. 16).

UN Women recognized the danger of the lack of valuable information regarding the outbreak and its related consequences and worked together with the WHO to provide sex- and age-disaggregated data on the pandemic’s health impact which can be found in the Women Count Data Hub (UN Women 2022a). The COVID-19 Global Gender Response Tracker, established by UNDP in cooperation with UN Women, which monitors the COVID-19 responses on a national level around the world (UN Women 2022a, b) is also important to mention again here. While these are useful tools and resources, the United Nations Development Program

(2020a) states itself that there is a “limited availability of sex- and age-disaggregated data, thus hampering the analysis of the gendered implications of COVID-19 and the development of appropriate responses” (p. 1). Without this crucial information, it is more difficult for humanitarian workers to identify the needs of the population, in particular women and girls.

Thus, improved needs assessment is pivotal to obtaining a comprehensive understanding of the lived experiences of women and girls. Additionally, this data needs to be contextualized within intersectional systems of power relations, underscoring the impact of various social forces and norms — such as gender, cultural, political, and societal — in shaping individuals’ experiences and needs (Ryan & El Ayadi 2020, p. 1407). An intersectional approach is vital to recognize how structural inequalities due to gender intersect with other social inequalities, such as religious minorities, elderly women, and women and girls with disabilities which are further marginalized. By adopting this nuanced perspective can the reinforcement of gender roles and gendered power dynamics be identified and addressed effectively.

#### **Advocating for female leadership in humanitarian relief efforts**

In humanitarian settings, which frequently emerge from contexts of conflict, the recognition of a gender perspective in response efforts stands as an imperative. Understanding the differential impacts of conflict on individuals based on gender is foundational for the establishment of a gender-sensitive humanitarian response. Moreover, the convergence between the provision of aid for immediate emergencies resulting from acute crises and the addressing of underlying vulnerabilities necessitates a concerted effort in humanitarian assistance and development endeavors.

Research has demonstrated that the inclusion of women in leadership positions correlates with a heightened likelihood of women’s concerns being reflected in global health policy (Dhatt 2020). Indeed, the involvement of women enhances the effectiveness and inclusivity of humanitarian responses by acknowledging the distinct concerns of women and girls, underscoring the significance of women’s participation in global health governance (Patel et al. 2020, p. 5). Conversely, the underrepresentation of women in leadership positions may exacerbate the impacts of crises on women and girls by overlooking the exacerbation of pre-existing gender inequalities by COVID-19 (van Daalen et al. 2020, p. 2). Therefore, to deliver effective response and relief in humanitarian settings and development activities, an equal gender balance in leadership positions of humanitarian organizations is not merely a “nice to have” but

rather “an essential and integral component of a sound public health policy” (Asi et al. 2022, p. 2).

In essence, the failure to address both the direct and indirect effects of COVID-19 on women, girls, and minority groups, and the failure to leverage their expertise and talent, constrains the efficacy of response efforts (Bali et al. 2020, p. 2). Against the backdrop of COVID-19 and its aftermath, Bahous and Schulze (2022) assert, “Yet at this time of unprecedented need for coherent and sustainable response, the innovation and leadership of half the world’s population are being largely excluded” (p. 1). When half of the population is marginalized in decision-making bodies during such crises, gender biases may be aggravated (Bali et al. 2020, p. 2). The empirical examples illustrate how COVID-19 has intensified gender inequalities, hindering progress towards SDG 5. Given the evidence that female leaders are more inclined to prioritize women’s interests, female participation in leadership roles is aspirational to effectively address the needs of women and girls in humanitarian settings.

#### **Reshaping humanitarian response: addressing gender disparities and power dynamics in crisis responses**

Increasing the number of women in leadership positions is vital; however, it is insufficient to transform the structural barriers women face within humanitarian organizations (Gupta 2023, p. 1). As gender equality essentially revolves around power dynamics, the underrepresentation of women in leadership positions is largely due to the structural obstacles and ingrained gender biases pervasive across all sectors, including the humanitarian one (Roy 2024, p. 225). Patriarchal sociocultural values lead to assumptions about leaders and criteria for effective leadership which echo male characteristics as standards of success (Rubenstein, Bergin & Rowe 2020, p. 97). As such, “organizational culture across the conflict and humanitarian health domain is a replication of societal level challenges as it is discriminatory, deeply misogynistic and generally hinders women pursuing leadership roles” (Patel 2020, p. 6). To dismantle the structural barriers women face within humanitarian organizations, a substantive change in terms of shifts in power imbalances is required. This entails taking proactive measures to challenge the status quo and pave the way for the future (Roy 2024, p. 225). Criticism of the current state of the humanitarian aid sector has been expressed, asserting “[it] is not equipped adequately for the humanitarian crisis challenges posed by the twenty-first century.” (Javed et al. 2021, p. 200). As Barnett (2011) argues, humanitarian organizations, despite their altruistic intentions, operate within and perpetuate existing power dynamics, which shape the distribution of aid and resources. These

imbalances need to be addressed to ensure more equitable and effective aid delivery. Indeed, reforms of the humanitarian system are continuously proceeding, but as Saez, Konyndky, and Warden (2021) note, these have failed to meaningfully address the underlying architecture (p. 2). Rather, the sector's power structures, and core business model, have remained the same, which continuously undermine the ability of the humanitarian system to deliver effective responses (Khakee 2017, p. 19). This rigidity was particularly evident during the COVID-19 crisis, which served as a moment to test the strength of the humanitarian system in the face of unprecedented challenges. However, instead of proving its efficiency and effectiveness, the humanitarian system was struggling to provide for the needs of the people (Asi et al. 2022, p. 13). As Saez, Konyndky, and Warden (2021) argue, every crisis "is a test of how far the humanitarian system has changed" (p. 2). The Russian aggression in Ukraine in early 2022 provided another such test for the humanitarian sector. With the invasion of Russia in Ukraine at the end of February 2022, millions of Ukrainians were immediately dependent on humanitarian assistance (ICRC 2022). Humanitarian agencies scaled up their efforts to deliver the much-needed aid and have continuously worked for months, despite the ongoing dangers posed by active conflict (OCHA 2022). Nonetheless, again it could be observed that SRH services were not prioritized, hindering the provision of care to women and girls urgently required (IAWG 2022). Hence, in March 2022, human rights organizations called on the international community to as follows:

*Ensure that all humanitarian response plans, financing and assistance respect human rights and prioritize the SRH rights of all women and girls and marginalized populations in Ukraine and transit and refugee host countries, including in the European Union (IAWG 2022, p. 1).*

This separate call to action had to be drafted and published, underscoring the insufficient integration of SRH rights into the initial response plans to adequately address the needs of women and girls. This examples the persistent lack of prioritization of women and girls' needs in humanitarian settings to the extent necessary.

For improved responses to future crises, it is imperative to comprehensively address the concerns of women and girls and place these higher on the agenda from the first steps of response planning onwards. While numerous organizations commit to doing so, these commitments are often not translated to effective action on the ground, as previous examples have shown. As deliberations on the trajectory of the humanitarian system continue, increased participation of women in decision-making

roles represents a vital step to ensuring that gender-sensitive and inclusive responses are delivered to the growing number of populations in need of humanitarian aid, setting the foundation to build a resilient, inclusive, and equitable post-COVID-19 future.

## Conclusion

To conclude, it is important to note that the imperative for women in leadership positions is not a novel concern, especially in the context of COVID-19. Accordingly, the theme of International Women's Day in 2021 was "Women in Leadership: Achieving an Equal Future in a COVID-19 World" (UN Women 2020). Thus, this issue has been recognized throughout the international community. Nonetheless, there has been a notable lack of scholarly attention on female leadership in the humanitarian sector. While this paper serves as a foundation to situate the current state of research, it underscores the need for further empirical investigations into the links between female representation in decision-making positions and humanitarian aid delivery.

Future research avenues may encompass assessments of the influence of gender-diverse leadership on organizational outcomes, such as program effectiveness and innovation. Additionally, exploring the interplay between intersectional identities and access to leadership roles within the sector could offer nuanced insights. Longitudinal studies that track changes in gender representation in leadership positions within humanitarian organizations over time could provide useful data for understanding trends and identifying persistent barriers. Exploring these gaps can lead to a better comprehension of gender dynamics in humanitarian leadership and their impacts, ultimately contributing to the overarching mission of alleviating suffering and promoting human dignity worldwide.

## Abbreviations

GBV	Gender-based violence
SDG	Sustainable Development Goals
SRH	Sexual and reproductive health
UN	United Nations
UNDP	United Nations Development Program
WHO	World Health Organization

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### Competing interests

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## References

- Aghajanian L, Page E (2020) COVID-19 and the participation of women and women's rights organisations in decision-making. K4D helpdesk report 850. Institute of development studies. <https://core.ac.uk/download/pdf/327123673.pdf>
- Asi YM, Bebasari P, Hardy H, Lokot M, Meagher K, Ogbe E, Parray AA, Sharma V, Standley CJ, Vahedi L (2022) Assessing gender responsiveness of COVID-19 response plans for populations in conflict-affected humanitarian emergencies. *Confl Heal* 16(4):1–15. <https://doi.org/10.1186/s13031-022-00435-3>
- Bahous S, Schulze S (2022) Op-ed: where crises multiply risks, women multiply solutions. UN Women. Retrieved May 16, 2022, from <https://www.unwomen.org/en/news-stories/op-ed/2022/04/op-ed-where-crises-multiply-risks-women-multiply-solutions>
- Bali S, Dhatt R, Lal A, Jama A, Van Daalen K, Sridhar D (2020) Off the back burner: diverse and gender-inclusive decision-making for COVID-19 response and recovery. *BMJ Glob Health* 5(5):1–3. <https://doi.org/10.1136/bmjgh-2020-002595>
- Barnett M (2011) *Empire of humanity: a history of humanitarianism*. Cornell University Press. <http://www.jstor.org/stable/10.7591/j.ctt7z8ns>
- Beigbeder DY (1991) *The role and status of international humanitarian volunteers and organizations: the right and duty to humanitarian assistance*. Martinus Nijhoff Publishers. <https://doi.org/10.1163/9789004634589>
- Beisou M, Van Wassenhove L (2020) Humanitarian operations: a world of opportunity for relevant and impactful research. *Manuf Serv Oper Manag* 22(1):135–145. <https://doi.org/10.1287/msom.2019.0799>
- Beisou M, Pedraza-Martinez AJ, Van Wassenhove LN (2021) Humanitarian operations and the UN Sustainable Development Goals. *Prod Oper Manag* 30(12):4343–4355. <https://doi.org/10.1111/poms.13579>
- Bullough A, Kroeck KG, Newbury W, Kundu SK, Lowe KB (2011) Women's political leadership participation around the world: an institutional analysis. *Leadership Quarterly* 23(3):398–411. <https://doi.org/10.1016/j.leaqua.2011.09.010>
- Dhatt R (2020) World health assembly and gender: three steps forward, many more to go. *Think Global Health*. Retrieved May 14, 2022, from <https://www.thinkglobalhealth.org/article/world-health-assembly-and-gender-three-steps-forward-many-more-go>
- Donovan O (2022) Conflict and COVID-19: exploring the effects on women. *International Relations*, 1–21. <https://doi.org/10.1177/00471178221140084>
- Emrich CG, Denmark FL, Den Hartog DN (2004) The GLOBE study of 62 Societies. In: House RJ, Hanges PJ, Javidan M, Dorfman P, Gupta V (eds) *Cross-cultural differences in gender egalitarianism: implications for societies, organizations, and leaders*. Culture, leadership, and organizations. Sage Publications, Thousand Oaks, pp 343–394
- Fuhrman S, Kalyanpur A, Friedman S, Nguyen T (2020) Gendered implications of the COVID-19 pandemic for policies and programmes in humanitarian settings. *BMJ Glob Health*. <https://doi.org/10.1136/bmjgh-2020-00262>
- Gazi T, Gazis A (2020) Humanitarian aid in the age of COVID-19: a review of big data crisis analytics and the General Data Protection Regulation. *Int Rev Red Cross* 102(913):75–94. <https://doi.org/10.1017/S1816383121000084>
- Global Protection Cluster. (2020). COVID-19 protection risks & responses situation report as of 24 August 2020. Retrieved on March 24, 2024 from <https://reliefweb.int/report/democratic-republic-congo/covid-19-protection-risks-and-responses-situation-report-no-7-24>
- Global Protection Cluster. (2022). Protection analysis update: Borno State, North-East Nigeria. Retrieved May 23, 2022, from <https://www.globalprotectioncluster.org/wp-content/uploads/27.04.2022-Protection-Analysis-Update-April-2022-FV-1.pdf>
- Goryunova E, Madsen SR (2024) The current status of women worldwide. In S.R. Madsen (Ed.), *Handbook of Research on Gender and Leadership*, (2nd ed., pp. 2–22). Edward Elgar Publishing Limited. <https://doi.org/10.4337/9781035306893>
- Gupta GR, Grown C, Fewer S, Nowrojee S (2023) Beyond gender mainstreaming: transforming humanitarian action, organizations and culture. *J Int Humanitarian Action* 8(1):1–20. <https://doi.org/10.1186/s41018-023-00138-1>
- Haack K (2014) Breaking barriers? Women's representation and leadership at the United Nations. *Glob Gov* 20(1):37–51. <https://doi.org/10.1163/19426720-02001004>
- Haack K, Karns MP, Murray JP (2020) The United Nations at Seventy-Five: Where Are the Women in The United Nations Now? *Ethics Int Aff* 34(3):361–371. <https://doi.org/10.1017/s089267942000043x>
- Haack K, Karns M (2023) Where are the women leaders in international organizations and what difference do they make? In A. D. Edgar (Ed), *Handbook on Governance in International Organizations*, (pp. 140–160). Edward Elgar Publishing Limited. <https://doi.org/10.4337/9781800884939.00020>
- Hawkins K, Morgan R, Overs C, Manzoor M, Dhatt R, Bali S (2022) Women and global health leadership: power and transformation. In Hawkins K, Morgan R, Overs C, Manzoor M, Dhatt R, Bali S. (Eds.), *Women and Global Health Leadership: Power and Transformation* (pp. 1–18). Springer International Publishing. [https://doi.org/10.1007/978-3-030-84498-1\\_1](https://doi.org/10.1007/978-3-030-84498-1_1)
- Hoyt CL (2010) Women, men, and leadership: exploring the gender gap at the top. *Soc Personality Psychol Compass* 4(7):484–498. <https://doi.org/10.1111/j.1751-9004-2010.00274.x>
- IASC (2024) List of humanitarian coordinators (HCs), March 2024. Retrieved March 25, 2024, from <https://interagencystandingcommittee.org/humanitarian-leadership-strengthening-section/list-humanitarian-coordinators-hcs-march-2024>
- IAWG (2022) *Emergencies: Ukraine*. Retrieved May 19, 2022, from <https://iawg.net/emergencies/ukraine>
- IRC (2019) "Everything on her shoulders": rapid assessment on gender and violence against women and girls in the Ebola outbreak in Beni, DRC. Retrieved May 20, 2022, from <https://www.rescue.org/sites/default/files/document/3593/genderandgbvfindingsduringevdresponseindrc-final8march2019.pdf>
- IRC (2022) *Ukraine Crisis*. Retrieved May 20, 2022 <https://www.rescue.org/topic/ukraine-crisis>
- Javed S, Chattu V, Allahverdipour H (2021) Predators among protectors: overcoming power abuse during humanitarian crisis through effective humanitarian diplomacy and a gender-transformative approach. *AIMS Public Health* 8(2):196–205. <https://doi.org/10.3934/publichealth.2021015>
- Khakee A (2017) Humanitarian action in international relations: power and politics. In: Heintze, HJ, Thielbörger, P. (Eds.), *International Humanitarian Action*, (pp. 19–29). Springer. <https://doi.org/10.1007/978-3-319-14454-2>
- Kroska A, Cason TC (2019) The gender gap in business leadership: exploring an affect control theory explanation. *Soc Psychol Quart* 82(1):75–97. <https://doi.org/10.1177/0190272518806292>
- Lokot M, Avakyan Y (2020) Intersectionality as a lens to the COVID-19 pandemic: implications for sexual and reproductive health in development and humanitarian contexts. *Sex Reprod Health Matters* 28(1):40–43. <https://doi.org/10.1080/26410397.2020.1764748>
- McQuilkin PA, Udhayashankar K, Niescierenko M, Maranda L (2017) Health-care access during the Ebola virus epidemic in Liberia. *Am J Trop Med Hyg* 97(3):931–936. <https://doi.org/10.4269/ajtmh.16-0702>
- Meagher K, Singh NS, Patel P (2020) The role of gender inclusive leadership during the COVID-19 pandemic to support vulnerable populations in conflict settings. *BMJ Global Health* 5:1–4. <https://doi.org/10.1136/bmjgh-2020-003760>
- Meagher K, Khaity M, Hafez S, Rodo M, Achi NE, Patel P (2023) Strengthening health systems and peacebuilding through women's leadership: a qualitative study. *Globalization Health* 19(1):1–19. <https://doi.org/10.1186/s12992-023-00920-1>
- Min Toh S, Leonardelli G (2012) Cultural constraints on the emergence of women as leaders. *J World Bus* 47(4):604–611. <https://doi.org/10.1016/j.jwb.2012.01.013>
- Niyi-Gafar OL, Adelakun OS (2022) The impact of viral diseases on the rights of vulnerable population: COVID-19 and the Nigerian internally displaced child. *Social Sciences & Humanities Open* 6(1):1–9. <https://doi.org/10.1016/j.ssoho.2022.100268>



- OCHA (2022) Global Humanitarian Overview 2022. Retrieved May 23<sup>rd</sup>, 2022 <https://reliefweb.int/sites/reliefweb.int/files/resources/Global%20Humanitarian%20Overview%202022%20%28Introduction%29.pdf>
- Paffenholz, T. (2018). Women in peace negotiations. In: Aggestam, K., Towns, A. (Eds.) *Gendering Diplomacy and International Negotiation: Studies in Diplomacy and International Relations*, (pp. 169–191). Palgrave Macmillan. [https://doi.org/10.1007/978-3-319-58682-3\\_9](https://doi.org/10.1007/978-3-319-58682-3_9)
- Patel P, Meagher KE, Achi N, Ekzayez A, Sullivan R, Bowsheer G (2020) "Having more women humanitarian leaders will help transform the humanitarian system": challenges and opportunities for women leaders in conflict and humanitarian health. *Confl Heal* 14(84):1–15. <https://doi.org/10.1186/s13031-020-00330-9>
- Profeta P (2017) Gender equality in decision-making positions: the efficiency gains. *Intereconomics* 50(1):34–37. <https://doi.org/10.1007/s10272-017-0640-4>
- Protosalti D (2021) The Future of Multilateralism: Global Cooperation and International Organizations. In: Hosli MO, Garrett T, Niedecken S, Verbeek N (eds) *UNICEF and UN Women in the post-COVID-19 era: how the pandemic is expected to reshape the humanitarian agenda*. Rowman & Littlefield, London, pp 19–38
- Rani Sarker M, Sarkar M, Begum IA, Humnath B (2023) Alam Systems thinking on the gendered impacts of COVID-19 in Bangladesh: a systematic review. *Heliyon* 9:1–18. <https://doi.org/10.1016/j.heliyon.2023.e13773>
- Reifen-Tagar M, Saguy T (2021) Early sociopolitical development matters for inequality: SDO and the gender gap in leadership. *Psychol Inq* 32(2):124–130
- Roy R (2024) Humanitarian organisations as gendered organisations. In: Roth S, Purkayastha B, Denskus T (eds) *Handbook on Humanitarianism and Inequality* (pp 222–236). Edward Elgar Publishing Limited. <https://doi.org/10.4337/9781802206555>
- Rubenstein K, Bergin T, Rowe P (2020) Gender, leadership, and representative democracy. *Democratic Theory* 7(2):94–103 Retrieved May 14 2022, from <https://www.berghahnjournals.com/view/journals/democratic-theory/7/2/dt070212.xml>
- Ryan NE, El Ayadi AM (2020) A call for a gender-responsive, intersectional approach to address COVID-19. *Glob Public Health* 15(9):1404–1412. <https://doi.org/10.1080/17441692.2020.179121>
- Saez P, Konyndyk J, Worden R (2021) Rethinking humanitarian reform: what will it take to truly change the system? Center for Global Development, Brief, 1–8. <https://www.cgdev.org/sites/default/files/Rethinking-humanitarian-reform-what-will-it-take.pdf>
- Sharma V, Scott J, Kelly J, VanRooyen MJ (2020) Prioritizing vulnerable populations and women on the frontlines: COVID-19 in humanitarian contexts. *Int J Equity Health* 19(66):1–3. <https://doi.org/10.1186/s12939-020-01186-4>
- Stark L, Meinhart M, Vahedi L, Carter S, Roesch E, Scott Moncrieff I, Mwanze Palaku P, Rossi F, Poulton C (2020) The syndemic of COVID-19 and gender-based violence in humanitarian settings: leveraging lessons from Ebola in the Democratic Republic of Congo. *BMJ Global Health* 5 <https://doi.org/10.1136/bmjgh-2020-004194>
- Tran NT, Tappis H, Spilotros N, Krause S, Knaster S (2020) Not a luxury: a call to maintain sexual and reproductive health in humanitarian and fragile settings during the COVID-19 pandemic. *Lancet Glob Health* 8(6):760–761
- United Nations Development Program. (2020a). Tackling social norms: a game changer for gender inequalities. Retrieved May 18, 2022 from [https://hdr.undp.org/sites/default/files/hd\\_perspectives\\_gsn0\\_0.pdf](https://hdr.undp.org/sites/default/files/hd_perspectives_gsn0_0.pdf)
- United Nations Development Program. (2022). Government Response to COVID-19: Lessons on gender equality for a world in turmoil. Retrieved June 16, 2024 from <https://www.undp.org/publications/government-responses-covid-19-lessons-gender-equality-world-turmoil>
- United Nations Population Fund (2014) Situation report: ebola outbreak response in West Africa. Retrieved June 16, 2024 from <https://www.unfpa.org/resources/ebola-situation-report-03-nov-2014>
- United Nations (2020) The Sustainable Development Goals Report 2020. Retrieved March 24, 2024 from <https://unstats.un.org/sdgs/report/2020/>
- United Nations (2022) Improvement in the status of women in the United Nations system, A/Res/76/115. Retrieved March 24, 2024, from <https://www.unwomen.org/sites/default/files/2022-05/Secretary-Generals-report-and-resolution-summary-How-to-improve-representation-of-women-at-the-UN-en.pdf>
- UN Women (2020) International Women's Day 2021 theme – "Women in leadership: achieving an equal future in a COVID-19 world". Retrieved May 17, 2022 from <https://www.unwomen.org/en/news/stories/2020/11/annou-ncer-international-womens-day-2021>
- UN Women (2022a) UN Women Data Hub. <https://data.unwomen.org/women-count>
- UN Women (2022b) Government responses to COVID-19: lessons on gender equality for a world in turmoil. Retrieved March 25, 2024 from [https://www.unwomen.org/sites/default/files/2022-06/Government-responses-to-COVID-19-Lessons-on-gender-equality-for-a-world-in-turmoil-en\\_0.pdf](https://www.unwomen.org/sites/default/files/2022-06/Government-responses-to-COVID-19-Lessons-on-gender-equality-for-a-world-in-turmoil-en_0.pdf)
- Usman S (2021) Assessing the humanitarian challenges facing international displaced persons (IDPs) on camps in Maiduguri, Borno State. *Int J Sustain Dev* 6(4):55–61
- Usta J, Murr H, El-Jarrah R (2021) COVID-19 lockdown and the increased violence against women: Understanding domestic violence during a pandemic. *Violence and Gender* 8(3):133–139. <https://doi.org/10.1089/vio.2020.0069>
- Van Daalen R, Bajnoczki C, Chowdhury M, Dada S, Khorsand P, Socha A, Lal A, Jung L, Alqodmani L, Torres I, Ouedraogo S, Mahmud AJ, Dhatt R, Phelan A, Rajan D (2020) Symptoms of a broken system: the gender gaps in COVID-19 decision-making. *BMJ Global Health* 5. <https://doi.org/10.1136/bmjgh-2020-003549>
- Visser M (2011) *The Female Leadership Paradox: Power, Performance, and Promotion*. Palgrave Macmillan
- Wenham C, Smith J, Morgan R (2020) COVID-19: the gendered impacts of the outbreak. *The Lancet* 395(10227):846–848
- Women in Global Health (2020) COVID-19: global health security depends on women: rebalancing the unequal social contract for women. Retrieved May 18, 2022, from <http://covid5050.org/Global-Health-Security-Depends-on-Women-WGH.pdf>
- World Health Organization (2018) Managing epidemics: key facts about major deadly diseases. Retrieved May 18, 2022, from <https://apo.who.int/publications/i/item/managing-epidemics-key-facts-about-major-deadly-diseases>
- World Health Organization (2021) Closing the leadership gap: gender equity and leadership in the global health and care workforce. Policy Action Paper. Retrieved May 15, 2022, from <https://iris.who.int/bitstream/handle/10665/341636/9789240025905-eng.pdf?sequence=1>

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