



RESISTIRÉ

Reducing gendered inequalities
caused by COVID-19 policies

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Agenda for Future Research

Addressing the Impacts of COVID-19 Policies on Gendered Inequalities

3rd cycle

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Summary

RESISTIRÉ researches the unequal impacts of the COVID-19 outbreak and its policy and societal responses on behavioural, social and economic inequalities in 30 countries (EU-27 excluding Malta, plus Iceland, Serbia, Turkey and the UK) and works towards individual and societal resilience. It does so by mapping policies and social initiatives, collecting quantitative and qualitative data, and by analysing and translating these to insights that are then used for designing, devising and piloting solutions for improved policies and social innovations to be deployed by policymakers, stakeholders and actors in the field and in different policy domains.

The results of the project's research activities, including the mapping of policy and civil society initiatives, quantitative analysis of Rapid Assessment Surveys and European level data, and qualitative data collection and analysis of pan-European workshops, expert interviews, and narrative interviews, conducted within its third cycle (September 2022-December 2022), combined with co-creation via expert discussions in Open Studios, have led to the development of Operational Recommendations and an Agenda for Future Research¹.

This Agenda for Future Research contains the identification of knowledge and research gaps. It outlines which research questions and topics future research should address in six distinct areas: health inequalities, age and ageing in times of crisis, digitalisation, access to green spaces, civic responses to crisis and gender-based violence.

¹ The RESISTIRÉ findings and selected datasets are published Open Access. Please visit the RESISTIRÉ community on Zenodo for free access to our results:
<https://zenodo.org/communities/resistire/?page=1&size=20>

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Introduction

RESISTIRÉ is a research and innovation project, funded under EU Horizon 2020. It aims to reduce gender+ inequalities caused by policy and societal responses to COVID-19. Ten European partners and a wider network of national researchers collect and analyse extensive data on policy and civil society responses, as well as quantitative and qualitative indicators of inequalities produced by the COVID-19 crisis, and its subsequent responses in three cycles. The first two cycles of analysis showed that national policy and societal responses are unequally (un)able to address gender+ inequalities, despite decades of gender mainstreaming in EU policymaking. Furthermore, quantitative as well as qualitative indicators expose an increase in existing and new, emerging, inequalities, where some groups have been made vulnerable to a higher extent than others. As we now approach not only the end of the RESISTIRÉ project, but also in some respects the end of the pandemic, this third cycle research agenda directs the attention towards the possibility to foster resilience and social justice in a post-pandemic world.

Aim of the Research Agenda

The aim of the research agenda is to identify knowledge gaps and formulate future research needs to understand, mitigate, and eradicate behavioural, social, and economic inequalities produced by the policy responses to COVID-19. The purpose is to identify knowledge gaps for future research agendas, and to inform the research questions that will be taken up in the next cycle.

Particular attention is paid to the overarching research related aims of the project:

- Investigate and analyse the impact of COVID-19 and of different policies developed by both the public and private sector on inequalities and understand the role of civil society in mitigating these inequalities.
- Identify and compare in which domains there are positive/negative COVID-19 impacts, for which gender+ inequality groups, and how these may be impacted by policy.
- Identify knowledge gaps on how inequalities play out and develop during outbreak periods.

The findings produced by RESISTIRÉ during the research phases are based on the analysis of various empirical data collected and analysed in different work-packages: the mapping of policies and civil society initiatives; official secondary data sources at the international and EU level, as well as Rapid Assessment Surveys (RAS) at the national level; expert interviews/workshops; and narratives from members of vulnerable groups. In the research agenda these findings have been synthesised in order to identify what knowledge is currently missing in order to support further research aimed at improving the development and implementation of COVID-19 induced policies/responses considering their impacts on vulnerable groups and (pre)existing inequalities.

Research aims in the third cycle of RESISTIRÉ

RESISTIRÉ is a project consisting of three cycles where each cycle informs the direction of subsequent cycles. In the first cycle, four domains were identified by the partners for developing research agendas: Care, Work & Pay, Gender-based Violence and Healthcare. The first cycle research agenda informed the research activities in the second cycle and since the research conducted uncovered additional knowledge gaps, the first three domains were revisited in the second cycle research agenda. In addition, the second cycle research agenda covered the topics of education, inclusive recovery policy and intersectional data collection and analysis. Again, the second cycle informed the direction of the research conducted in the third cycle. Hence, while this research agenda is primarily based on the results of the third cycle of the RESISTIRÉ project, it builds upon the results of all three cycles.

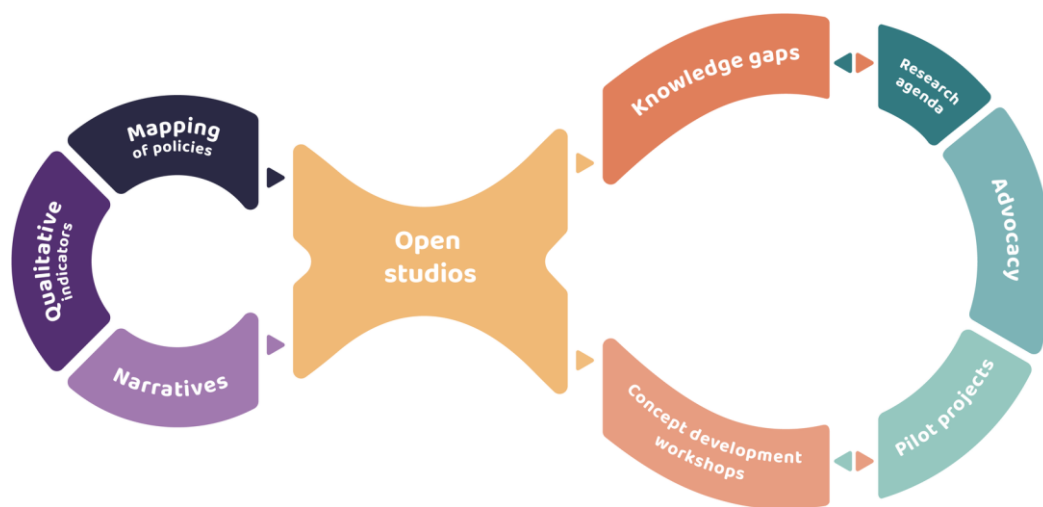


Figure 1: RESISTIRÉ methodological step-by-step three cycle process

The figure above shows the different steps involved in each cycle of the project. In the third cycle, the research activities in step one addressed some of the knowledge gaps identified in cycle two. The insights gathered in step one then informed the direction of step two, the 'Open Studios'. The Open Studios constitute the co-creative step of the project, and it brings together multiple kinds of expertise. They are action-oriented and their ultimate output consists of ideas for concrete action, input for recommendations to reshape policies and unanswered questions that can form the foundation of a future research agenda. In this third cycle research agenda, four themes were directly inspired by the Open Studios: age and ageing in times of crisis, digitalisation, green spaces, and civic responses to crisis. Two additional themes, health inequalities and gender-based violence have been prominent areas of inequality throughout the pandemic and throughout the RESISTIRÉ project (Kerremans and Denis, 2022; Sandström and Strid, 2022; Živković et al., 2021; Živković et al., 2022).

Research Agenda on Health Inequalities

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Identified as a public health emergency at the beginning of 2020, the COVID-19 pandemic has hit globally not only in terms of infections and deaths, but also in terms of various health-related aspects that both directly and indirectly were affected. While a large number of studies - including RESISTIRÉ - has already shown the short-term/immediate effects of COVID-19 on mental health, access to healthcare and particularly the impacts of the pandemic on health and healthcare access of vulnerable groups, more research is needed to understand the long-term impacts on health and health inequalities. Building on the Research Agenda on Human Rights and Health of cycle 1 (Živković et al., 2022), which was more focused on understanding the immediate consequences of the pandemic for healthcare access, healthcare workers and vaccination inequalities, the current Research Agenda identifies five key themes related to long-term impact of COVID-19 on health, which are presented in more details below.

HEALTH INEQUALITIES AFFECT THE MOST VULNERABLE



Knowledge Gaps and Research Questions

Long-term and intersectional effects on mental health

As shown from the findings of RESISTIRÉ and broad research, mental health was severely affected, with some social groups suffering more compared to others (Camara et al., 2023; OECD, 2021; Stovell et al., 2022). Several Rapid Assessment Surveys (RAS) mapped by RESISTIRÉ have highlighted that mental health has deteriorated, especially among young people and people in precarious working conditions, because of intersecting problems such as economic instability, isolation, and closure of schools (Stovell et al., 2022).

The pandemic has uncovered well-established gaps and a worldwide underinvestment in mental health prevention and care (The Lancet Public Health, 2022). As highlighted in the narrative interviews collected by RESISTIRÉ, the fact that the pandemic spotlighted mental health, and the awareness that others were suffering too, made it easier for many to address their mental health issues, thus becoming a better story of solidarity. Some individuals from marginalised groups reported to have sought professional help, others practiced different forms of self-care that they hoped to sustain in the long-term. What should be explored further is whether the negative impact of the pandemic on mental health will last for how long, and among which groups these consequences will be more long-lasting.

A closely related topic investigated in RESISTIRÉ analysis is resilience, which refers to the capacity to maintain or recover mental health, despite experiencing adversity (Herrman et al., 2011; see Sandström et al., 2022). Resilient individuals play a fundamental role in resilient communities and societies, and the pandemic has made clear how important is to develop resilience in the society to prepare individuals to face future challenges (Joossens et al., 2022). The findings from the EU quantitative analysis reveal that lower levels of resilience are prevalent among some Europeans sub-groups three years after the COVID-19 outbreak, such as among lower educated women (Harroche et al., 2023). However, the focus on individual resilience risks over-emphasising individuals' capacities and self-reliance (i.e., the micro level), and in effect, under-emphasising the responsibility of authorities and the role of structures (i.e., the macro level). To build and strengthen the resilience of a population, it is necessary to develop a system of infrastructure and collective resources that is resilient to external adversities. National level strategies such as building trust, strengthen solidarity, fostering resilience leadership, or providing mental health services on time to people in need are some possible ways to foster resilience (Zhang et al., 2022). Researchers are urged to explore how a resilient system can be built and maintained in context of long-lasting and overlapping crises, such as in the current period.

Research questions:

- What are the long-term impacts of the pandemic (and overlapping crises) on mental health? How has the pandemic affected gender+ inequalities in mental health? Lessons can be drawn from, and research build on, previous crises.
- What are the effective policies/initiatives to address mental health on the long-term among vulnerable populations? Lessons can be drawn from, and research build on, previous crises.
- What have we learned from the pandemic in relation to addressing mental health status during a crisis? What responses work, and which do not work? What changes from the pandemic should be kept?
- What are the resources needed to increase resilience - especially among vulnerable groups - and how can resilience be built into the structures/authorities to support individuals?

Unequal access to sexual and reproductive health

The pandemic stressed the capacity of hospitals and healthcare systems, forcing many countries - especially in the first year of the crisis - to reduce or postpone non-essential medical care (OECD, 2021). Unmet healthcare needs became particularly evident in some specific areas of health and for some individuals, which were the focus of RESISTIRÉ throughout the different cycles (Stovell et al., 2021; Stovell et al., 2022; Harroche et al., 2023). A group experiencing obstacles and inequalities in access to healthcare during the pandemic was that of transgender people, whose treatments were largely interrupted due to the priority given to COVID-19-related treatments. The cross-sectional international study TransCareCovid-19 survey investigated the effects of the pandemic on healthcare for transgender individuals (Koehler et al., 2021) and the collaboration of the authors of the survey with the RESISTIRÉ team contributed to bring intersectional insights to these topic (Harroche et al., 2023). More than half of the respondents of the survey indicated they experienced restrictions in at least one type of healthcare (among access to hormones, hair removal treatment, surgery, aftercare and mental healthcare). More counselling support, improved medical knowledge about trans-specific issues among healthcare providers, and a lower threshold for service accessibility were recurrent themes among the answers given to the question of what services respondents wanted to see from the (trans) health providers in the current pandemic situation. These findings are relevant starting points indicating the specific healthcare needs of a group of the population, and how the system should take these needs into account to address potential inequalities in access to healthcare.

Another area of healthcare that was strongly affected by the pandemic was that of sexual and reproductive health, which in many countries was temporarily 'put aside' to leave more space for COVID-19-related care. An example was reported by an Italian street-level

bureaucrat member of the centres for family advice, interviewed in the context of RESISTIRÉ qualitative analysis (Sandström et al., 2023). During the peak of COVID-19, the services offered – ranging from gynaecological counselling to cancer screening – were completely suspended, significantly affecting the health of specific groups for which these services were essential, such as migrant women. The suspension of healthcare service, even if only temporary, will likely generate consequences also in the long term, for example with the creation of long waiting lists once the services were restored (Cibin et al., 2023), especially for vulnerable groups such as women with a lower socioeconomic status and for the LGBTQ+ communities. Understanding the impact of decreased access to healthcare, and how healthcare services are considered or defined essential, is a task for future research.

There are also examples of civil societies initiatives mapped by RESISTIRÉ addressing specifically the issue of access to sexual and reproductive healthcare for marginalised groups, which can be considered as better stories. For example, in Hungary a gynaecological clinic for homeless (often traumatised) women was installed; in Denmark, treatment for sex workers with drug addictions were offered directly in the places they frequent and not only in clinics (which are often considered unsafe and uncomfortable); organisations in Romania and Croatia worked to offer support to women who had problems with obtaining access to abortion-related services, services that were often deemed to be non-essential as a result of restrictions on mobility and hospital access. Going beyond sexual health, an initiative (in Belgium) focused on bringing healthcare and information to marginalised places: here, community health workers conduct outreach activities in deprived neighbourhoods of which they themselves are part. Future research should further investigate these initiatives, which could be beneficial not only for some specific vulnerable groups, but they can also be extended to different groups with particular needs.

In this context, the effects of the pandemic on the postponement or suspension of specific treatments should be investigated in a comparative perspective, as it is likely that not all the countries applied the same rules for prioritisation of healthcare services. The TransCareCovid-19 survey, for example, was carried out in 80 countries, however the sample size for each country did not allow to comparatively study the effects of COVID-19 national policies on access to transgender healthcare. More research is thus needed to understand how different contexts might affect differently access to healthcare, and the right to sexual and reproductive health.

Research questions:

- What are the short and long terms impacts of decreased access to sexual and reproductive care during the crisis? What are the effects on vulnerable groups?
- How can the continuation of essential sexual and reproductive services during a crisis be ensured? Are special measures needed to ensure continuation of healthcare services among vulnerable groups?
- Which countries, or welfare regimes have produced better outcomes in terms of healthcare access, and for which groups? Which countries, or welfare

regimes have increased inequalities in terms of healthcare access, and for which groups?

- How can the sustainability of civil society initiatives carried out during the pandemic to address healthcare needs of vulnerable groups be ensured (especially in case of future health crises)? How can these better stories be made more widespread?

Access to preventive resources for physical and mental health

The pandemic created different types of health-related needs, directly related to reducing the risks of getting infected or spread the virus, or related to individuals' wellbeing more in general. Preventive resources include not only resources related to COVID-19 prevention (e.g., masks and gels), but other resources necessary for individuals' health, such as green spaces for physical activity, healthy foods, and/or psychological support. RESISTIRÉ research, in line with previous research, has highlighted inequalities in access to these resources, where social class (accentuated by the intersection with other inequality grounds, such as gender or ethnicity) is a primary source of differentiated access.

For example, studies have shown that socially deprived neighbourhoods are generally less green, or are more distant from urban green space (Hoffmann et al., 2017; Schüle et al., 2019). The movement restrictions imposed by the COVID-19 policies have removed the possibility for residents of areas without urban green spaces to access better quality and clean air environments, with severe impacts on physical and mental health. Despite differences in the policies implemented by countries, the impossibility of staying in close contact with nature and evading the city was reported by the people interviewed by RESISTIRÉ. A similar pattern can be identified regarding nutritional habits. National studies during the pandemic have shown that the decrease in fruit and vegetable consumption was more pronounced for the most deprived compared to the least deprived groups, and for women compared to men (Braithwaite et al., 2022). Food banks or other initiatives at the local level reported by interviewed people within RESISTIRÉ (e.g., providing hygiene kits and food packages) were helpful for those in need. Regarding psychological support, while some experiences reported in the RESISTIRÉ narratives talked about this type of support offered to frontline workers, this was not tailored to specific needs of this heterogeneous work category; in other cases, psychological support services were interrupted, with detrimental consequences for people's mental health (especially the most vulnerable ones). All these examples show how the pandemic has acted on existing health inequalities, reinforcing them and in some cases even worsening them.

Research questions:

- What are the short and long terms impacts of reduced access to preventive services during the crisis on health and well-being for the population? Which services, with reduced access, had the most impact? Which groups of the population were most effected by the reduced services?
- What measures are needed to ensure fair access to adequate prevention measures? How can these measures be made affordable for those who need them?
- What was the impact of solidarity and local civil society organisations (CSOs) in making preventive resources available for the groups in need during the crisis? What lessons can be drawn for future crisis?

Institutional support and interconnections between civil societies and professionals

For some aspects, the bureaucracy and resistance to change of public institutions were hindering factors for the creation of quick response to the crisis. Where institutions could not be successful in addressing specific needs of (especially vulnerable) population, CSOs were able to activate themselves and experiment innovative practices that would not usually be allowed. This was the case, for example, of Denmark (the above-mentioned initiative). The policy mapping highlighted, however, cases in which policies helped to improve the situations of the vulnerable people; for example, the municipality of the capital and the district in Hungary started various initiatives to mitigate the effect of the crisis, such as organising food distribution, allocating resources, offering support to older people and distributing masks; in Italy, strong efforts at the governance level were made to create an inclusive communication campaign about vaccination that could include also less integrated citizens such as migrants; in Czech Republic, an association of medical students (*Medici na ulici*) supported homeless people directly by offering basic medical treatments in mobile units or directly on the field.

These examples of coordination between high-level institutions (being municipalities, or governments) and the bottom-up initiatives should be further investigated, to analyse their short- and long-term effects on the health of their target groups.

Research questions:

- What lessons can be learned from the crisis in integrating quick and innovative responses in already existing institutional structures?
- What lessons can be learned from the crisis to strengthen the relation between healthcare professionals and CSOs?
- How to sustain successful measures taken during the crisis such mobile health units? How can these initiatives be supported by institutions and how can they support institutional services?

Digital literacy and health

The suspension of face-to-face health service resulted, in many countries, in a provision of alternative online e-services. Accessing and understanding these services require both digital means and literacy that might not be available to all population groups, as evidenced from RESISTIRÉ research of the three cycles, and some research questions on this topic were already proposed in the Research Agenda of cycle 1 (Živković et al., 2022). Nevertheless, the switch to digital services proved to be very useful during the crisis, when otherwise no alternatives could be accessed (see research questions in the Digitalisation section). The use of digital services may be impacted by other factors than just having the tools and skills to access the services: while some population groups might be enthusiastic about the use of digital tools, others might be reluctant to use them, even if they have all the resources necessary to access and understand them. Some studies on the use of video consultation for primary care, for example, show that patients are generally satisfied, compared to online or face-to-face consultations, when video consultations help them saving time (Donaghy et al., 2019) and they were the only resource available during the pandemic, thus “better than nothing” (Hvidt et al., 2022). Yet, face-to-face consultations seem to be preferred when related to very personal or serious issues (Donaghy et al., 2019). Few studies have explored his topic, and these are mainly focused on practitioners’ attitudes or outside the European context. Both quantitative and qualitative research should address this gap, to provide policymakers with a clearer picture of the extent to which digital health services have been used by different social groups, and whether they could be further developed to ease the burden of healthcare.

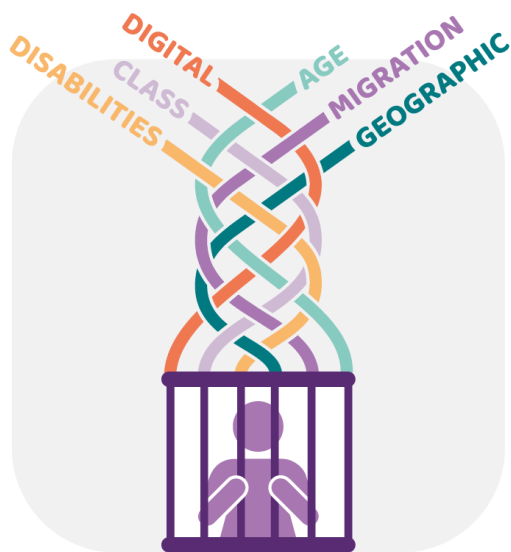
Research questions:

- How has digitalisation impacted access to care during the crisis? Does this impact differ by groups users or by the type of service?
- How are digital (health) services perceived by potential users? Beyond tools and skills, which groups are more reluctant to use these tools, and why?

Research Agenda on Inequalities in Age and Ageing

Authors: Anne-Charlott Callerstig, Sofia Strid, Lina Sandström, Alicja Bobek

In all three cycles of RESISTIRÉ, inequalities related to older persons have been prominent. During the pandemic, medical reports quickly established that the virus hits the older population the hardest, although they were not more likely to contract the virus than other age groups. Studies show how this vulnerability often was regarded as a fate or the “natural order of things” (Beaulieu et al, 2020)). Yet, studies have established how prejudices, institutional bias and societal discrimination against older persons interact and create inequalities and negative effects beyond the pure medical aspects of the virus. While ageism is not a new feature in society, the pandemic both exposed, and increased, age-related inequalities, showing how vulnerabilities relating to age - and affecting older persons - are both a condition and set of processes (Zarowsky et al., 2013). These vulnerabilities are co-constructed by other structural barriers, such as racism, misogyny, and ableism (Henderson and Sawchuk, 2022; Katz et al., 2019). Ageism and age discrimination in society remain unrecognised and unchallenged (Equinet, 2020), even though discrimination based on age is the most widespread form of discrimination in Europe (FRA, 2018). Based on the findings of RESISTIRÉ, this Research Agenda identifies three key areas where more



INTERTWINED NATURE OF INEQUALITIES

Knowledge Gaps and Research Questions

The role of older persons in crises policymaking and crisis responses

Both in research and activism, the active role of older persons during crises has been highlighted as undervalued and made invisible, especially the active role of older women. There is a discourse upholding beliefs about the shortcomings of older persons, rather than highlighting their contributions, strengths, or resilience (Henderson and Sawchuk, 2022; McLaren et al., 2020). While the impact of ageism was raised early on in the pandemic, warning of a “parallel outbreak of ageism”, it was not addressed sufficiently in pandemic policymaking (Ayalon et al., 2020: 49). Even when pandemic measures were reported to address the specific needs of older persons, there were many accounts of the lack of attention to gender in “mainstream” policies, such as the lack of specific measures to address the increasing violence towards older women. The RESISTIRÉ analysis of pandemic policy measures shows that in most cases little attention was paid to ensuring the (continued) inclusion of older people in social and civic life (Cibin et al., 2021, 2022), and the narrative analysis show the effects of this omission (Axelsson et al., 2021; Sandström et al., 2022, 2023). Furthermore, the RESISTIRÉ findings suggest that for many older people, the pandemic is ‘not over’. The levels of inclusion and social activities enjoyed by some senior citizens have not returned to the pre-pandemic levels. Due to the long-term impact of such prolonged social isolation, this needs further scrutiny and research. Furthermore, the mapping of the National Recovery and Resilience Plans (and equivalent recovery policies) show that even if age is frequently mentioned, it was in the form of generic statements underlining how the pandemic particularly affected older persons, without any specificities related to sex or gender of the seemingly homogenous group ‘older persons’ (Cibin et al., 2022).

Future research in this field should therefore focus on further identifying gaps in how age and ageism are integrated (or not) into crises policymaking and crises responses in order to attain better knowledge about how integration can be strengthened on a European, national and local level and across different actors and organisations.

Research questions:

- In what ways have the needs, experiences and interests of older persons been integrated into crises management pre, during and post-pandemic and why?
- How have the negative effects on older persons wellbeing from the pandemic been considered in recovery strategies?
- What (are the main factors that) impact on the inclusion of older persons in crises policymaking e.g., policy consultation and representation?
- How can older persons' active participation in crises policymaking and crises responses be strengthened, and made visible?

The impact of the pandemic on older persons from a gender+ perspective

Loneliness, isolation, and mental illnesses of older persons, especially relating to older women, were highlighted in RESISTIRÉ quantitative and qualitative research (Axelsson et al., 2021; Sandström et al., 2022; Sandström et al., 2023; Stovell et al., 2021). Overall, however, the RESISTIRÉ mapped national Rapid Assessment Surveys (RAS) only focused on older people's experiences to a small extent, and when these experiences were included, the number of older respondents was small. There were also small numbers of older respondents in some in some EU COVID-19 surveys (Stovell et al., 2022). The mapped RAS that did include a focus on age, and did not reveal that social distancing, fears of contracting COVID-19, and disruption of normal routines had negative impacts, with loneliness and anxiety found to be a particular problem. One example is how social isolation has consequences for life expectancy; isolation was found to increase the risks of cardiovascular, cognitive, psychological, and hormonal conditions. Other examples are how the loss of care responsibilities, e.g., for grandchildren, due to social distancing restrictions had negative impacts on mental health and where older women were at a higher risk of experiencing anxiety than older men. When looking at the intersection of age and pre-existing intellectual disability, women respondents experienced more stress and anxiety than men. Other examples were how higher risk of anxiety was linked to women being more likely to live alone, have lower income levels, and experience chronic illness, making them more dependent on others and therefore at a greater risk of abuse (Stovell et al., 2022). The RESISTIRÉ results also show a worsening economic situation for older persons, especially for those who do not have work and do not receive enough pensions. The intersection of gender (the fact that older women are more at risk of poverty than men were a common theme), nationality, class and age was particularly salient as many care workers are older migrant women whose working conditions, and financial situation, are highly precarious (Axelsson et al., 2021; Sandström et al., 2022). Earlier research has pointed to the need to adopt a lifecycle or life span perspective to understand the diverse needs and experiences

of older persons (Diehl and Wahl, 2020). Older persons are a largely heterogeneous group that differ in life experiences, cultural backgrounds, health, and the process of aging itself is highly diverse and contextually embedded (ibid.; Ayalon et al., 2020). In general, RESISTIRÉ shows that there was limited consideration of gender in data collection such as in surveys addressing older people across EU, with only a third considering the differences between older women and men. This could point to a significant gap in the data and may indicate assumptions about the homogeneity of older people's experiences (Stovell et al., 2022).

Future research in this field should therefore focus on creating a better understanding of the short term and long-term effects on older persons wellbeing beyond mere health/medical aspects. Special attention is needed to uncover intersectional aspects and in applying a lifecycle approach to better understand which groups of older persons are more at risk in crises situations and why.

Research questions:

- In what ways have the physical and psychological wellbeing of older persons been affected by the pandemic and why?
- How have intersecting strands of inequalities affected the wellbeing of different groups of older people and why?
- How will long-term cognitive health of older adults be affected by the pandemic and prolonged isolation? What will be the impact on global cognitive impairment prevalence?

Ageism and discrimination of older persons in times of crises

Ageism and age discrimination in society remains unrecognised and unchallenged (Equinet, 2020), even though age is one of the most widespread forms of discrimination across Europe, including the right to life (FRA, 2018). Other reports included the risk of neglect, violence, and financial exploitation of older persons; stereotyping, prejudice or discrimination against individuals or groups based on their age; stigmatisation and hate speech; threats to the social and economic well-being; and the situation of specific groups of older people. Many of which has resulted from the pandemic restrictions imposed rather than from the virus itself. The RESISTIRÉ mapping of pandemic policies has revealed how the restrictions imposed on older persons have affected their freedom of movement, including restrictions on when and where they could shop, not being able to receive visitors in nursing homes, and bans to use public transport for older person (Cibin et al., 2021). In the narratives, older people often expressed that the policy meant to protect them often left them feeling vulnerable and excluded (Axelsson et al., 2021). The results have furthermore

highlighted a digital age gap, with negative consequences for the possibilities to bridge the restrictions imposed in receiving information, access to health care and to communicate and stay in contact with friends and relatives (Cibin et al., 2021).

Future research in this field should therefore focus on creating a better understanding of ageism in times of crises and the invisibility and lack of attention to ageism and age discrimination in crises policymaking and crises responses. Research needs to especially focus on the lack of intersectional approaches and the perceived homogeneity of older persons.

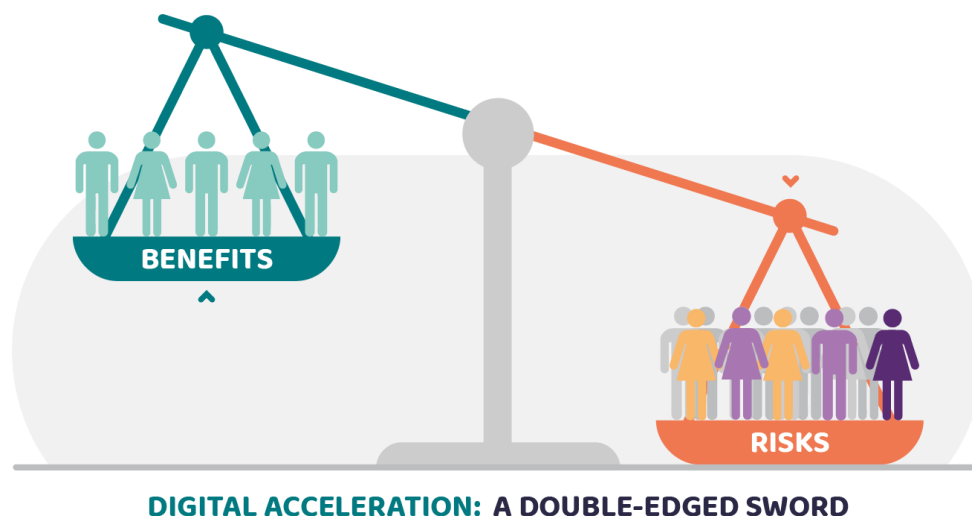
Research questions:

- How can discrimination towards older persons be prevented in crises?
- What impact on, and sustains, effective policies to expose and remedy age-based discrimination in crises and beyond and why?
- How can intersectional policy analysis that addresses ageism and age-based discrimination be strengthened?

Research Agenda on Digitalisation

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Digitalisation, referred to as the development and deployment of digital technologies and processes, has taken on a new dimension since the COVID-19 pandemic. When faced with social distancing and the closure of workplaces, schools and other public and private institutions going digital was often the only solution. Many activities carried out remotely included teleworking, online schooling, and access to public services during the crisis. However, while the practices initiated during the various lockdowns accelerated digitalisation, the increased reliance on digital devices, especially for essential services such as education and healthcare, had detrimental effects on many vulnerable groups and increased the digital divide (see RESISTIRÉ Agenda for Future Research - cycle 2). Given the ambivalent nature of this phenomenon and its growing role in all aspects of life, further research must be conducted. Building on the findings from the previous cycles of RESISTIRÉ, we will present research gaps related to digitalisation that have been identified during the third cycle. Firstly, we will address the need to tackle this phenomenon through an intersectional lens. Secondly, we will highlight the implications for public policy and human rights. Finally, we will consider the role of CSOs and the necessity to research these issues at an organisational level.



Knowledge Gaps and Research Questions

Digitalisation through an intersectional lens

The third cycle RAS analysis (Harroche et al., 2023) highlighted the worsening of digital inequalities due to the pandemic, reinforcing the findings from international literature (Beunoyer et al., 2020). Accessing digital resources and knowing how to use them was a key issue during lockdowns, impeding a high proportion of senior citizens' access to information, services, and social contacts, and working-class children and students' ability to attend classes. While many authors acknowledge that digital inequalities are embedded in other inequalities (Robinson et al., 2015), few studies have looked at this issue regarding the COVID-19 crisis considering multiple, intersecting inequality grounds. The rare studies that do so highlight new kinds of phenomena rising within vulnerable groups. For instance, concurring with findings presented in the RESISTIRÉ factsheet on safe digital spaces, a survey carried out in Ireland on LGBTI+ lockdown experiences showed that Black and South Asian LGBTQ+ people were more than twice as likely to experience violence or abuse, including online violence, during lockdowns compared to white LGBTQ+ people (survey conducted by Belong to LGBTQ+ Youth Ireland). Thus, there is an urgent need for intersectional approaches to better understand digitalisation and for data on ethnicity, race, gender identity, sexual orientation, religion, citizenship status etc. to be more systematically collected and analysed in order to document effects and help mitigate them.

Research questions:

- How can digitalisation and the digital divide be researched through an intersectional lens?
- What conditions are necessary for digitalisation to prevent exacerbating intersectional inequalities for vulnerable groups?

Public services

The findings from Cycle 3 highlight the advantages and disadvantages of digitalisation in the provision of public services. The shift to online/phone services was crucial in maintaining education, welfare and healthcare services during the pandemic while enabling greater access to municipal services for individuals living on the outskirts of cities. In specific situations, such as gender-based violence, digital tools have proven useful in maintaining contact with victims. From the perspective of street-level bureaucrats, digitalisation has enabled them to save time

on certain services and organise work and resources more efficiently. However, those who depended the most on state services and benefits (e.g., refugees, homeless people, those from more disadvantaged socio-economic backgrounds) were negatively affected by the rapid switch from face-to-face to online services. More specifically, multiple RAS showed that language inequalities fed into digital inequalities and acted as barriers to accessing public services and benefits when they were made available solely through online platforms.

Research questions:

- How have public services changed as a result of the impact of digitalisation? What differences can we see across countries and what can we learn from them?
- How can we ensure that better stories and inclusive digitalisation strategies can be maintained in the long term?
- Which factors/conditions can foster an inclusive digital transformation of public services?
- How can we assess the impact of new technologies introduced as part of digitalisation in public services?
- What institutional strategies were introduced to shift towards the digital provision of public services? To what extent were such strategies underpinned by an inclusive review of services and ongoing monitoring?
- How can we ensure that the perceived positive effects of digitalisation can be maintained in the long term?

Digital rights

According to international literature, digitalisation can lead to new forms of discrimination and has the potential to alter people's rights. RESISTIRÉ's third cycle results have shown differential impacts of digitalisation in terms of access to public services, access to equipment and technology and digital literacy skills (digital divide) with implications regarding human rights that have the potential to create "second-class citizens". Thus, there is a need to better understand digital rights including privacy, freedom of expression, access to information, IP (Internet Protocol), network neutrality, digital access, and cybersecurity. The evolution of government actions through digitalisation needs to be further researched especially given the preponderant role of AI and algorithms that are now emerging.

It is crucial to consider the implications of digital transformation on access to information, which is a fundamental human right. Further research is needed to ensure that this right is guaranteed in the context of digitalisation. With the widespread adoption of digital media and the growing reliance on social media for news consumption, coupled with the proliferation of 'fake news', particularly during times of crisis, it is necessary to further research how to ensure the development of digital critical thinking skills for all. The design process of digital innovation has

been identified as a critical step in safeguarding digital rights. Initiatives such as “Universal design” and “Design justice” have emerged to mitigate the detrimental aspects of digitalisation and promote inclusivity through active participation and engagement of users in the design process to ensure that digital technologies, products, and services are accessible and user friendly for all. Attention to design is also underlined by the European Declaration on Digital Rights and Principles.

Research questions:

- What are the implications of the digital divide regarding human rights and democracy?
- Can digital rights be guaranteed? If so, how?
- How can access to information and media literacy be ensured and developed in the context of digitalisation?

CSO digitalisation

Digitalisation has been described as improving work processes and the internal sharing of information within organisations, especially civil society organisations (CSOs). The analysis of CSO initiatives demonstrated that they also benefited from more opportunities of keeping users – especially hard to reach users – in touch with their initiatives and of creating networks that are ‘resilient’. At the same time, it seems necessary to reflect on how these advantages associated with a rapid digital transition interact with the inequalities that this phenomenon helps to foster or create. For this reason, it is important to observe how the use of digital technologies by civil society has interacted with the dynamics related to the digital divide and digital inequalities, by mapping the best practices implemented to make this process as inclusive as possible. At the same time, it is important to understand how the interaction of various organisations with new technologies has influenced the organisation of their internal dynamics, responsibilities and roles.

Research questions:

- When dealing with the digital transition, have CSOs considered strategies to involve those without digital devices, digital literacy and/or skills? If yes, how?
- What are the advantages and disadvantages brought by the digital transition process in the relationship between CSOs and users?
- What kind of new roles are needed within CSOs in order to better manage the digital transition process?
- What kind of hybrid (online and face-to-face) user activities have CSOs developed after lockdown periods? Are these formats still in use?

Digitalisation at the organisational level

Digitalisation has had a profound effect on organisational structures, processes, practices, routines, spaces and work patterns across sectors influencing civil society organisations, public organisations and private organisations. Since the various lockdowns, many organisations have adopted hybrid ways of working. This has had a particularly strong effect on working conditions and job displacement. Across the three cycles, RESISTIRÉ showed how the ongoing digitalisation of employment had a mixed impact on workplaces, improving some aspects such as accessibility for people with disabilities, parents, and rural inhabitants, while also exacerbating existing inequalities and creating new ones. For example, the lack of access to appropriate digital resources was challenging in the transition to working from home, as many struggled to understand the multitude of digital tools and services that they now had to utilise on a day-to-day basis along with reconciling digital needs and care within households. This project does not have scope to explore the impact of digitalisation at the organisational level, but the following questions emerge for further research.

Research questions:

- To what extent can digitalisation mitigate, reproduce or create new inequalities in organisations? Which digitalisation strategies work/do not work from an intersectional perspective?
- How can we use digitalisation as an opportunity at the organisational level to develop more inclusive organisations?

Research Agenda on Gender+ Inclusive Green Spaces

Authors: Alicja Bobek, Sara Clavero, Caitriona Delaney

The global environmental crisis remains an acute problem in post COVID-19 times. A broad range of issues such as urban planning, clean air and green spaces are amongst the important themes within the pan-European discussion on environmental justice (Axelsson et al., 2021). While the environmental crisis pre-dates COVID-19, it has been acknowledged that the pandemic crisis resulted in a deepening of inequalities in this domain, and thus universal and equal access to green spaces in the post-COVID-19 world requires scrutiny. The issue of access to green spaces, and more particularly, intersectional inequalities associated with this, has been highlighted in the three cycles of the RESISTIRÉ project. The findings demonstrate the gender+ character of such inequalities, yet some gaps in knowledge on this topic remain. Such gaps will be explored in this Research Agenda, with a specific focus on access to green spaces, defined in a broad sense, including public parks, community gardens, city farms, and places undergoing a process of 'wilding'. Several key themes related to this topic have been identified throughout the project research, namely **(1) benefits of inclusive access to green spaces, and of expanding access for all groups; (2) inequalities and obstacles related to accessing green spaces (3) inequalities related to decision making and planning for the creation of, and access to, green spaces.**



Knowledge Gaps and Research Questions

Benefits of equal access to green spaces

Findings from the three cycles of the RESISTIRÉ project in relation to **the benefits of accessing green spaces**, which are a vital part of people's lives and wellbeing, are manifold. At a very basic level, it has been argued that the prevention and reduction of health risks for all groups due to environmental pollution should be on the top of the EU environmental justice policy agenda (Stovell et al., 2021). This aim, in part, is achieved by ensuring equal access to green spaces, a reduction in exposure to environmental pollutants, and allowing all citizens to make environmentally conscious consumption choices (Ganzleben and Kazmierczak, 2020). It needs to be emphasised, however, that this is based on a narrow understanding of green spaces (e.g., parks) while data collected for the RESISTIRÉ project shows that green spaces can be understood in a much broader context, with different ways of engagement with green areas and with nature.

The narratives collected during the first cycle illustrated the benefits of various types of greenspaces. An example included a female participant in Croatia reporting the benefits to her wellbeing and general quality of life of being able to access nature in various ways – such as swimming and beekeeping. This participant, who has a physical disability, was able to leave the urban centre she lived in to access the benefits of green spaces. However, the narratives from the first cycle also illustrate that some participants were denied access to green spaces and that this had negative effects on their mental health. This was especially the case for individuals from lower socio-economic status backgrounds and for women parenting alone. Better stories of being able to access green spaces and get outside in nature in the widest sense, collected during the first cycle, included: 1) a bottom-up initiative in Belfast that developed a community urban garden in a formerly grey space; 2) 'safety walks' in the Finnish city Turku to engage its citizens in creating safer and more equal public spaces, including green spaces; 3) a Greater London Authority that awarded grants to community projects; 4) bottom-up activities in several French cities with a particular focus on women. On the other hand, the first cycle analysis of RAS identified a study conducted in Greece highlighting concerns over urban space. These concerns came to light during the pandemic as people were spending more time in their immediate areas and thus became increasingly aware of the benefits of being able to access green spaces, and of the issues regarding the condition of green spaces in their areas. The issues reported included the quality of public spaces, walking conditions and cycling facilities.

In the first cycle, it was recommended that existing public green spaces need to be improved while new ones should also be created. These spaces should be accessible, especially to the vulnerable, even during crises including lockdowns. While access should be available and free for all, some groups are more likely to be more in need of access to green spaces than others. Examples include people with disabilities, senior citizens, and young children - particularly those who do not have access to private green spaces at home. In the third cycle, evidence also emerged about the healing aspects of regular access to green spaces, as was illustrated in

several of the narratives, where some respondents retrospectively referred to outdoors activities as beneficial to their mental health during the COVID-19 pandemic. Access was also highlighted in the context of overcrowding, which in Europe usually affects vulnerable groups, especially those from lower socio-economic backgrounds. For those groups, free access to green spaces can be a crucial resource.

It was also noted during the third cycle of Open Studios that green spaces can be a source of conflict within local communities. One example provided related to intergenerational conflicts already existing in communities, which can be translated into tensions about how to use a newly created green space in a neighbourhood, or whose usage is to be prioritised. For that reason, it was noted that careful design and inclusive consultation processes with diverse stakeholders need to be adopted when designing new green spaces or reviewing existing ones. However, it was emphasised that green spaces can also provide a space for conflict resolution and reconciliation. This can take place, for example, when different groups are mobilised to work together on the revitalisation of existing spaces or setting up new green areas.

In relation to the theme which relates to benefits of access, unequal **availability of accessible space** has been highlighted as a knowledge gap. The needs of different age groups involved in the space, such as older people, teenagers, and small children, should be considered. The use of green spaces for other purposes, such as public meetings or education, are also among the topics which require more exploration. While the benefits of such versatile uses have been highlighted in the course of the research, further scrutiny is required to fully establish the ways in which this could be achieved.

The benefits brought by initiatives led by CSOs and community groups, especially in relation to reclaiming neglected green spaces or re-wilding grey spaces also stands out as a significant gap in research that needs further exploration. This is particularly important considering that, during the third cycle of the project, there was no CSO or community initiatives directly related to green spaces identified by the National Researchers. Finally, the role of municipalities, for example in relation to the ways in which unused land is approached, how they support bottom-up community initiatives.

Research questions:

- How can we channel existing community impulses to create new, universally accessible and gender+ inclusive green commons?
- How can we make green commons adaptable depending on the time of day, the needs of users, and different groups (e.g., young children, elderly)?
- In what ways can communities be mobilised to ensure that different vulnerable groups work together to create or revitalise green spaces that are inclusive and beneficial from a gender+ perspective?
- How can green spaces be used for various purposes benefiting different users and social groups, for e.g., public meetings, sports, education, cultural events, and other recreational activities, particularly in relation to vulnerable groups?

Intersecting inequalities in relation to accessing green spaces

Despite the proven benefits that green spaces have for both individuals and the community, the research conducted by the RESISTIRÉ project, as well as international studies, suggest that **there are important inequalities in relation to accessing green spaces**. Crucially, socio-economic status and social class stood out. It became evident through data analysis that, to a certain extent, inequalities related to people's access to green spaces increased during the pandemic as lower socio-economic groups relied on public rather than private green spaces. This was particularly important from the point of view of gentrification. As part of this process, urban areas that have undergone 'greening' become highly sought after on the housing market, thereby pushing out people on lower incomes and those from vulnerable groups. The consequent displacement of those from lower socio-economic backgrounds effectively prevents them from benefitting from any positive urban (re)development, like the expansion of green spaces (Kerremans and Lionello, 2021). **Our findings also suggest that access to green spaces can be also affected by intersecting inequalities**. For example, age, in conjunction with socio-economic background, was an important factor in relation to unequal access, particularly during the pandemic. While restricted access to green spaces for elderly people during the pandemic was specific to the public health measures, overall limitations related to age-inclusive green spaces became apparent. In particular, there is evidence of younger cohorts dominating such spaces, for example public parks, therefore not 'allowing' the older groups to fully enjoy them, or, in some cases, preventing them from feeling safe in such places. The divide between young and old people was discussed in this context, as was disability. For example, the availability of infrastructure meeting the needs of various age groups was recognised as sometimes problematic. Similarly, the issue of accessibility to green spaces by people with different abilities was also identified as an issue. Furthermore, the issue of safety was discussed in the context of green spaces that remain empty and secluded and thus can pose safety threats for women and other vulnerable groups. While safety remains an issue in relation to accessing green spaces, some better stories have been identified throughout the RESISTIRÉ study. For example, one of the pilot projects funded by RESISTIRÉ, Aqui, worked on making a park in Barcelona accessible and safe for women, people with disabilities and those from migrant backgrounds to use regularly. Aqui also successfully worked towards reducing tensions amongst the various groups using the park.

The lack of available data on intersecting inequalities related to accessing green spaces represents one of the main research gaps in this theme. More relevant data would be of benefit as the overall topic remains under-researched, particularly in the context of large surveys. Accessible, representative and disaggregated data (e.g., by factors such as socioeconomic status, gender and/or age) is required to adequately study the intersections of various inequalities in relation to accessing green spaces (Stovell et al., 2021). How unequal access to green spaces affects different vulnerable groups also requires more qualitative scrutiny. In particular, the question of increasing inequalities in relation to accessing green spaces post-pandemic remain an under-explored issue deserving further study. Collecting data/information on more versatile initiatives promoting inclusive access to green spaces could also provide an important avenue for further research.

Furthermore, the question of access and increasing access for all may also be explored in the context of the ongoing **gentrification of urban areas**, as well as the cost-of-living crisis, which may affect where people live, or whether they can easily afford public transport which allows them to access green spaces.

As gentrification in the context of the cost-of-living crisis is likely to result in the further displacement of people from lower socio-economic backgrounds, **more scrutiny should be also given to the links between close access to green spaces, and social and economic resources.** As identified through the RESISTIRÉ research, social class constitutes an important inequality ground (Axelsson et al., 2021) and can be interpreted in terms of 'deficient resilience' (Forbes et al., 2009). This needs to be considered and understood from a gender+ and a feminist institutionalism perspective. Through such theoretical perspectives, *attention is given to how issues related to environmental justice are located at macro and meso levels rather than at groups and individuals made vulnerable* (cf. Deveaux, 2006). This knowledge gap should be explored further.

Finally, the **complexity of vulnerability** is one of the possible topics to explore in future research in relation to green spaces. This will help to provide a better understanding of the needs of vulnerable groups as well as the possibility of recognising vulnerabilities beyond the 'traditional' categories.

Research questions:

- What kind of data can be collected to ensure that adequate knowledge is generated in relation to accessing green spaces from an intersectional perspective?
- How can we ensure that green spaces are available to everyone and how do we reduce the grey-green divides between different groups?
- How do we design public green spaces so that diverse groups of people, including those from vulnerable groups, are comfortable in them and are encouraged to seek them out?
- How do we ensure that public green spaces are safe for everyone and how do we prevent (gender-based) violence at times when green spaces are sparsely populated?
- How can we ensure that 'vulnerability' is approached from an intersectional perspective in order to gain a better understanding regarding unequal access?

Inequalities in decision-making and planning for, and the creation of, and access to, green spaces

Unequal participation in decision-making and planning for green spaces was also an important theme emerging from the RESISTIRÉ research, as members of vulnerable groups have been inadequately included in urban planning processes, including those around creating accessible green spaces. Another issue emerging from our research relates to the unequal management of green spaces, as well as frequent ‘discriminatory policing’ which has a negative effect on the uptake of green spaces by certain marginalised groups. On a more general level, research results also highlighted that women remain largely absent from environmental policy formulation and from decision-making, while, at the same time, being largely affected by environmental changes and by environmental policymaking. In terms of ways forward, the civic response to the crisis was discussed at length and provided useful insights to the question of participatory decision-making processes. For example, participants who took part in the workshop focused on tackling isolation and exclusion emphasised that it is **necessary to find ways of transforming the window of opportunity provided by the pandemic into a permanent change**. The analysis highlights the importance of minimising bureaucratic obstacles and encouraging openness to change. Furthermore, communication, collaboration and innovation were highlighted as integral to moving forward post crisis in an inclusive and impactful manner. Innovation was mentioned in relation to encouraging participation and in relation to funding. Amongst the main points arising from this workshop was the need for strategies to be built into organisational design to increase involvement with ‘hard to reach’ groups. Also, noteworthy in relation to green spaces accessibility is that within vulnerable communities there are hierarchies, and that CSOs and policy makers need to be cognisant of this to be able to negotiate such challenges. Indeed, understanding the ‘complexity of vulnerability’ in relation to accessing green spaces is key to reducing the barriers encountered by marginalised individuals and groups.

The lack of involvement of vulnerable groups to ‘solve’ problems can be linked with the need for decision-making to be more inclusive and involve participatory methods. A main finding from RESISTIRÉ is that there was a lack of women’s representation in state responses to the pandemic as the relevant decision-making positions were mainly held by men. Most of the pandemic-related measures identified in European countries were at the national government level (with some exceptions observed in countries with a federal system), sometimes with the support of expert committees created ad-hoc to deal with the emergency (Kerremans and Lionello, 2022). This resulted in an absence of a gender+ sensitivity in policy responses and in measures aimed at solving problems at the social level more widely. Research has shown that decisions made about and during lockdowns generally impacted those experiencing inequalities more than those in secure positions. These decisions were made in a top-down fashion without involvement from vulnerable individuals/groups. As this issue is also applicable to the subject of gender+ inclusive green spaces, increased research scrutiny should be given

to the way in which decision-making is conducted. Moreover, including local communities in decisions about green space activities so that green spaces become more attractive to them can go towards genuine community and solidarity building. This should be further explored.

Participatory planning processes should thus be further investigated in order to establish ways forward towards more inclusive environmental decision-making. Collecting 'better stories' and good practices from different European cities, and making them more visible to the public, could provide an avenue for such investigation. How the communities are engaged in consultation processes regarding green spaces, should also be investigated. This issue is also important in the context of gentrification, as questions emerge around the actors involved in the initiatives, as well as around the target groups, and the effects that gentrification has on local communities. The interactions between activists, policy makers, and advocacy groups in different national and local contexts may also be further explored. In this context, more scrutiny will be required to identify the ways in which coalitions between CSOs, community groups and public organisations have emerged to date, and in what way these can be formed in the future. The issue related to the political context and the ownership of land would also require further scrutiny. As has been discussed in the third cycle Open Studio, different national and local contexts are important as the private/public division can be understood differently depending on the legislation. For that reason, the universal right to use the space can be sometimes problematic. The question of what entitlements the general public may have in relation to the different types of land within urban spaces remains an important knowledge gap within the last theme.

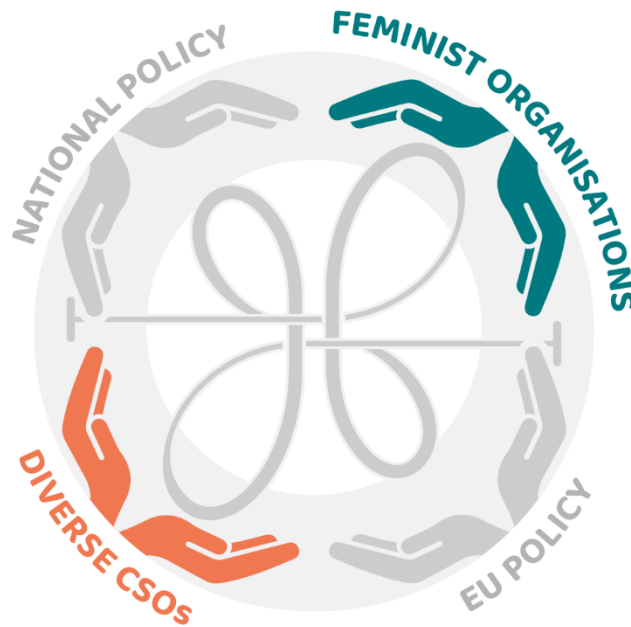
Research questions:

- What can policy makers do to make access to green spaces more inclusive?
- How do we prevent discriminatory policing by public authorities and local law enforcement?
- How can we facilitate more equal and diverse local management of public green spaces?
- How can a fully participatory consultation process and decision-making process regarding green spaces be achieved at different levels?
- What are the consequences of different land ownership laws and policies on the creation of new green spaces and equal access to existing areas?
- What role do CSO's have in working with individuals/policy makers to ensure equal access to and use of green spaces?

Research Agenda on Civic Responses to Crisis

Authors: Ayşe Gül Altınay, Pınar Ensari, Nazlı Türker

Civil society organisations played a key role in providing an immediate response to the pandemic (Tageo et al., 2021), engaging in activities aimed at repairing the damages to health, society, and the economy that were caused or exacerbated by the pandemic and pandemic-related policies. Including the perspective of civil society organisations and learning from their experiences has been a key objective throughout the RESISITRÉ project but it was given particular attention in the third cycle through the mapping of 128 civil society initiatives representing promising practices of support provision to meet the needs of vulnerable people during the pandemic (Cibin et al., 2023). 'Creative Civic Responses to Crises' was also the theme of an Open Studio in the third cycle. These activities offered insights into practices and kinds of action that can contribute to reversing the developments that deepen inequality. They also highlighted the need for further research to better understand the role civil society organisations can play in a crisis.



Knowledge Gaps and Research Questions

The Research and Activism Nexus

Civil society organisations (CSOs) have always played a key role in research with vulnerable groups, helping academic researchers reach the most vulnerable communities and orienting them towards the field. In recent years, many CSOs have engaged in action-research of their own, supporting their activism in the field with research findings and activities (Cibin et al., 2023; Kerremans and Denis, 2023). RESISTIRÉ research has highlighted the significance of such research for the identification of problems and development of solutions that address gender+ inequalities and possibilities of more inclusive action and policy (Cibin et al., 2023). Research by and with CSOs proves to be particularly significant in crisis situations where prior relationships of trust play a key role in accessing vulnerable communities that remain outside the reach of public services and whose needs remain unidentified and unaddressed.

Research questions:

- What strategies can be developed to expand the field of action-research through collaboration between academic institutions and CSOs?
- How can action-research by and with CSOs help ensure that civic responses are inclusive and reduce gender+ inequalities?
- How has the collaboration between CSOs and academic researchers contributed to identifying the needs of vulnerable populations as well as assessing the impact of specific initiatives?
- What are the challenges faced in such collaboration and how can these challenges be addressed by academic institutions and funders?
- CSOs may have the openness, but not the time and the resources to research the 'root causes' or underlying factors of the issues they address in their activism. What are some of the better stories of action-research bringing together academics and activists in mutually generative ways?
- What are the better stories of researchers becoming activists - especially in terms of facilitating creative, effective, inclusive crisis response?

Bridging experience and creativity: organisational flexibility and innovative practices

COVID-19 highlighted the significant role of civil society in responding to -crises. RESISTIRÉ's third cycle research found specific features and actions that enabled CSOs to navigate the pandemic challenges, to craft creative responses to overlapping crises, and to offer effective support to vulnerable people (Cibin et al., 2023). Civil society proved to be more agile and act faster than the public sector and were able to offer rapid answers to the issues that emerged during the pandemic. This was because CSOs were able to take advantage of their organisational flexibility, creativity, and, in some circumstances, even their ingenuity, enabling them to experiment with novel approaches that ultimately produced positive results (Cibin et al., 2023). Institutional frameworks played a strong role in these dynamics. Less bureaucracy and resistance to change in the context of the pandemic crisis enabled many CSOs to test innovative solutions.

The pandemic crisis and its multi-layered challenges stimulated creative civic response. In better stories of civic response to crisis as identified by RESISTIRÉ, CSOs have learned to improvise. This capacity was built on prior experiences—along with those of other organisations—in crisis circumstances and in developing organisational flexibility to react swiftly to sudden changes. This involves being able to both follow an experience-based plan for how to react in such circumstances and develop improvisational skills that allow them to adjust to the situation (Cibin et al., 2023). These skills were often the outcome of enhanced reflexivity, which raised awareness of competences within the organisations and, as a result, opened the door to the possibility of allowing more autonomy to employees, volunteers, and users. (Cibin et al., 2023).

Research questions:

- In CSOs' attempts to provide immediate response to crisis situations, what role does path dependence play and what are the dynamics through which innovative solutions are stimulated?
- What tools can be developed within organisations to train reflexivity and enable awareness of one's own response possibilities when a crisis arises?
- What is the role of mutual learning in civic response? What enables greater and deeper learning for all parties involved?
- How can for-profit organisations learn from non-profit organisations about being inclusive and intersectional?
- What are the differences between various types of organisations (formal vs informal, small vs big, etc.) in their capacities to offer rapid solutions during crisis situations?

- What are the better stories of innovative solutions developed during the pandemic by CSOs to mitigate inequalities? What allowed/hindered their institutionalisation? What happened to those solutions and the organisations themselves in the transition to a post-pandemic world?

Multi-actor, collective, and participatory ways of organising and decision-making

The response of feminist and LGBTQI+ organisations to overlapping crises offer several key insights to learn from:

- multi-actor, collective, and participatory ways of organising and decision-making;
- using an intersectional lens to expand their reach and to refine their services to address differential needs;
- making invisible forms of gendered inequality and discrimination visible;
- investing in community-building both prior to, during and after the crisis;
- creating intersectional alliances and communities around the horizontal framework of rights-based 'solidarity' based on mutual learning and transformation, rather than top-down, hierarchical frameworks of 'help' or 'charity';
- monitoring the effects of the crisis in its aftermath.

In the Turkish context, close collaboration between CSOs (particularly feminist organisations) and the municipalities proved to be key to equality work and to reaching the most vulnerable (e.g. Pandemic Map of Turkish Municipalities, Deep Poverty Network, etc.). Expert consulted as part of RESISTIRÉ research highlighted that the women's movement had been much better organised compared to public authorities and municipalities and during pandemic, online networking among women's organisations had made them even more efficient in terms of providing support to women across the country. An expert representing a European-level organisation also mentioned the significance of collaboration and networking between different CSOs as a better story of responding to the pandemic (Sandström et al., 2022).

Feminist and LGBTQI+ organisations were key particularly in the struggle against gender-based violence, yet they were often not financially supported by the governments and were typically excluded from crisis resilience funding (Altınay et al., 2022). Furthermore, anti-gender policies and discourse in certain countries have limited the work and impact of feminist and LGBTQI+ organisations by demonising and stifling them.

Research questions:

- What (public and private) mechanisms would ensure feminist and LGBTIQ+ organisations to have access to sustainable funding, particularly during crises and in countries where anti-gender policies are dominant?
- How can the experience of collaboration and networking by feminist and LGBTIQ+ organisations during the pandemic be shared, disseminated, and finally integrated into the work of other civic initiatives?
- What has been the impact of the presence or absence of such networks among feminist and LGBTIQ+ organisations in different parts of Europe - particularly in terms of developing inclusive solutions to pandemic inequalities?
- How have anti-gender policies impacted the presence or absence of such networks and collaborations - and vice versa?
- What role have collective and participatory ways of organising and decision-making played in different contexts across Europe - in the context of the pandemic and other crisis situations?
- What are some examples of multi-actor, collective, and participatory ways of organising and decision-making?
- What are the ways of making invisible forms of gendered inequality and discrimination visible?
- In what ways can investing in community-building both prior to, during, and after a crisis be beneficial?
- To what extent do pre-existing communities (of action and solidarity) impact crisis response efforts? How do crises themselves and the contextual factors surrounding them affect community building and organising? By exploring the interplay between pre-existing community building, crisis dynamics, and contextual factors, what can be learned about the factors that contribute to effective response in times of crisis?
- How do intersectional alliances and communities based on mutual learning and transformation promote rights-based 'solidarity'?
- What are the impacts of monitoring on a crisis response? How can monitoring processes be improved to measure the efficacy of public response as well as of civil society response?
- How can people with different skills be incorporated into crisis response? What impact does such inclusion have on the efficacy of crisis response from a gender+ intersectional perspective?

Building alliances: (Local and national) public services and CSOs

Better stories of civic response to crises identified by RESISTIRÉ highlighted complementary state-civil society relations (Dayson and Damm, 2020), most notably when CSOs were involved in decision-making, coordination, and activities related to public services (Cibin et al., 2023). In the cases analysed, various public institutions demonstrated the feasibility and effectiveness of collaborating on and testing innovative solutions based on the experience of those working directly with vulnerable people. In situations of uncertainty, various public authorities began to recognise the vital intermediary role played by CSOs and they showed a greater predisposition to collaborate with them. However, there were also various cases where these collaborations were not possible or where the public authorities hindered the work of CSOs. There were instances where initiatives were supported by local institutions but were stalled at the national level (Cibin et al., 2023). Moreover, governments frequently fell short of creating adequate channels for coordination and communication between relevant ministries and civil society actors during the pandemic crisis. As a result, they could not utilise the experiences and skills of CSOs in reaching out to vulnerable groups and developing effective responses to inequalities (Altınay et al., 2022). This was particularly the case in countries where increasingly illiberal forms of governance lead to anti-civil society and anti-gender politics (Kuhar and Paternotte, 2017; Petö, 2021).

The experts consulted as part of RESISTIRÉ stressed the significance of expanding the opportunities for collaboration both between public services and CSOs and between CSOs, finding methods and tools that could enable the design of experience-based policies through the sharing of information and better stories as well as continuous dialogue with stakeholders (Cibin et al., 2023).

Research questions:

- What tools can be designed to facilitate a continuous dialogue between public services and CSOs with the goal of co-designing and co-implementing crisis response plans?
- What tools can be developed to encourage the creation of relationships between CSOs and public institutions before crises take place? In situations where these relationships were in place before the pandemic, what difference did they make in the provision of public services to vulnerable communities?
- What kind of collaborations between CSOs and public institutions can be formed to allow more innovative approaches to support vulnerable people? What are some better stories of such collaborations?
- What factors contribute to the success or failure of collaborations between public authorities and CSOs and among CSOs? What are the characteristics of more effective collaboration, and how can these be fostered or developed? How did the pandemic crisis influence the relations between state and civil society in different parts of Europe and with what consequences for gender+ inequalities?

Enabling environment for CSOs in the face of crisis

In the areas of research conducted as part of RESISTIRÉ, creating a better story is not just the result of civil society's capacity to start a new initiative or maintain existing ones. Certain structural conditions at the institutional level proved to be significant. Most of the initiatives would not have become better stories without funding from national, regional, or local public authorities, often made available to respond specifically to the pandemic (Cibin et al., 2023).

The pandemic demonstrated how it is possible and essential to boost funding from public authorities to CSOs. CSOs need to count on stable forms of funding from the public authorities to become sustainable and develop resilience. The pandemic showed how civil society initiatives, if better funded and supported, can help to mitigate inequalities among vulnerable groups. This response to an emergency situation must be transformed into a more stable condition for CSOs (Cibin et al., 2023).

Even though CSOs enhanced the problem-solving capacity of contemporary societies, these potentials have to be balanced against the weaknesses of CSOs, which also calls for policy responses that strike a balance between controlling and enabling measures in terms of regulation and support.

In general, it is vital to find ways of transforming what was a window of opportunity during the pandemic into a permanent situation. It is important to create room for the experience and creativity of civil society by minimising bureaucratic obstacles and fostering an openness to change. To this end, creating coalitions formed by CSOs and public organisations has become crucial for the effective management of complex issues affecting the most vulnerable particularly during poli-crises (Cibin et al., 2023).

Research questions:

- Which public financing systems can be considered effective in enabling CSOs to be economically sustainable in the long term?
- What would a political eco-system that stimulates innovative solutions look like? What is the role of different forms of governmentality in creating the environment CSOs operate in?
- How can public authorities stimulate the emergence of civic responses during crisis situations and create an enabling environment for CSOs to operate?
- How can the advantages CSOs offer to society, and indeed to governments, be strengthened while minimising any disadvantages?
- What is the right policy framework for governments and CSOs to balance their respective interests while realising the potential of civil society to reduce inequalities in public service?
- When CSOs are given long-term, flexible funding (as opposed to short-term project-based funding), how does this impact their capacity to respond to crises?

- What are the economic gains that have resulted from (preventive) CSO response to mitigating the effects of the pandemic for the most vulnerable communities and individuals - in addition to their humanitarian and political impact?
- In terms of regenerative activism, what elements constitute an enabling environment that adequately meets the needs of activists and CSOs professionals? How can systems and structures be designed to support the physical, emotional, and mental well-being of activists, while also fostering a culture of creativity and solidarity?
- In authoritarian political systems where anti-gender policies prevail, what tactics have civil society organisations (CSOs) employed to effectively respond to crises, and what factors contribute to the success of these tactics?

Research Agenda on Gender-based violence

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The research conducted within the RESISTIRÉ project in the third cycle of activities has shed light on the paramount role played by civil society organisations and initiatives to provide quick and safe responses to the needs of survivors of gender-based violence. Civil society organisations have adopted innovative ways of reaching out to survivors in the crisis context, while ensuring anonymity and safety. Many of the initiatives mapped by the project also showed the sensitivity of these organisations to intersecting inequalities when addressing gender-based violence, as opposed to standardised and insufficient responses usually set up by national authorities. Linking to the second cycles research agendas (Kerremans and Denis, 2023), this research agenda stresses the need to conduct further research into the better stories of civic responses to gender-based violence. The impact of the pandemic crisis on gender-based violence also drew attention to the importance of prevention programmes and their impact in transforming gender roles, and to closely monitor the impact of political backlash against gender equality. Adopting intersectionality as one of the paradigms of analysis, RESISTIRÉ reiterates the importance to improve knowledge on the complexity of gender-based violence, in terms of forms and the diversity of groups affected. In this sense, the pandemic crisis contributed to bringing attention to the violence that is perpetrated in specific work contexts, where it is still largely invisible.



FEMINIST + HUMAN RIGHTS APPROACH

Knowledge Gaps and Research Questions

CSOs played an important role in supporting survivors of gender-based violence: how to learn from their actions to improve public responses?

The third cycle of RESISTIRÉ's research has focused on the identification and analysis of the so-called "better stories". This focus has enabled an understanding of what capacities, competences, and capitals (social, symbolic, etc.) were acquired or strengthened during the COVID-19 pandemic and could be valorised during subsequent emergencies and socioeconomic crises. Various initiatives mapped in the three cycles include crowdfunding, expansion of services on-line and by phone, increasing availability of shelters, and innovative ways of reaching out to survivors while ensuring anonymity and safety.

Four better stories of civic responses to gender-based violence stand out: civil society's capacity for **innovative and rapid responses** to crisis situations; cross-sectoral **collaboration between public and private actors**, and a **broadening and change** in the **conceptualisation and understanding of gender-based violence**. Lastly, civil society organisations' (CSOs) approaches and activities also reflect **sensitivity to the diversity of experiences and needs of survivors of gender-based violence** (women with children, elderly women, LGBTIQ+ persons, etc.), incorporating some degree of intersectionality into their actions, when policies usually lag behind.

Among the lessons learned from the pandemic, the analysis of CSO initiatives points to the need to strengthen their collaboration with public authorities and with other civil society organisations in order to develop better policies and provide a better coordinated response to multi-dimensional needs. Coordination between relevant services is also at the heart of EP's proposal for a new directive on combating violence against women and domestic violence. However, a study commissioned by FEMM (2022) points out existing **gaps in safety measures such as procedures for risk assessment, coordination between the police and other services, and training** for law enforcement and other public officials dealing with gender-based violence.

It is also apparent how overburdened and saturated services were during the crisis. **Service-providers** in the field of gender-based violence (and other) have been exposed to increased workload, with high level of stress, limited funding, health-related constraints, among others. Especially, secondary trauma was identified as an acute risk across caring professions, policy, advocacy, and other practitioners who work with survivors of gender-based violence. Across RESISTIRÉ's research, it was emphasised the importance to support service providers, address the impact of multiple crises on their health and on the resilience of support services. These are

also issues that need further research. The Pilot Project “Exhale: Moving through secondary trauma together”, led by the NGO Chayn, explores the effects of secondary trauma on the mind, body, emotions, and behaviours, and how to recognise these effects in ourselves and others.

Research questions:

- What are the lessons learned from the pandemic regarding gender-based violence, in terms of the solutions /opportunities developed to overcome obstacles and inequalities by individuals, CSOs and policy makers?
- Is coordination between policy makers and CSOs delivering better results in addressing gender-based violence, if so, what models of coordination prove more effective? How can coordination be framed so that it acknowledges the CSOs’ contributions, without simultaneously freeing the state and local authorities from the responsibility to address gender-based violence?
- How can national actors and Member States incorporate lessons learned from the response provided by CSOs?
- Does the need to strengthen victims' access to justice and to reinforce their protection offer new scenarios for the collaboration of public and private actors?
- What is the impact of the pandemic and the polycrises context on the service providers? How can resilience be fostered within this group?
- Do private actors, led by CSOs, have operational advantages in responding nimbly to crisis situations? If so, what are these advantages of the conditions that enable them, and how these advantages could be capitalised in the response to gender-based violence?
- What are the enablers of public-private partnerships and what are the main difficulties?
- How can improving the wellbeing of front-line workers also have a positive impact on the services provided to survivors?

More research is needed to measure the impact and effectiveness of prevention programmes

Prevention is a key obligation in the harmonised response to gender-based violence put forward by the Istanbul Convention, but crisis-related initiatives and policies have not often included it in their agenda. Examples of existing prevention programmes and actions have been collected by the Council of Europe (2014), pointing out the lack of robust evaluation.

Through RESISTIRÉ, two pilot projects address prevention of gender-based violence through sports and non-formal education in two different contexts (Serbia and Greece). Results of both projects will provide important information about the potential of sports to teach equality, respect and inclusion to future generations.

At the same time, there is urgent need for **evidence on the impact and effectiveness** of existing prevention programmes in changing prevailing attitudes about the roles of men and women in society, and attitude towards gender identities and sexual orientations that differ from the dominant norm. It is important to know which programmes are succeeding, how, what actors are included, factors/conditions/methodologies are proving effective and allow for the programmes to be replicated across Europe. Another important aspect to consider is the organisational culture and structure of those actors implementing such programmes, and the impact that these elements might have on the implementation and success of the programmes, but also what organisational changes are produced at the organisational level. In case of sports and sporting clubs, what is the impact of their organisational structure and culture in perpetuating violence, how this can be changed?

Impact and effectiveness should also be measured with regard to different geographical and political contexts. Ample and varied evidence on the impact of prevention programmes is needed to support better policymaking and better use of public funding.

Research questions:

- Which of the prevention programmes have proved effective in changing societal attitudes and norms?
- What are the actors/factors/methodologies implemented in these programmes that appear as promising to foster this change?
- Is non-formal education among the youth effective in producing long-term changes in gender roles?
- What is the role of organisations and agencies like sporting clubs (but also other institutions involved with the youth) in promoting changes in gender roles or reinforcing patriarchal/homophobic and transphobic attitudes? To what extent their organisational structure, culture, rules are fostering unequal relations that potentially result in violence?
- What is the impact of prevention programmes on organisational structures and culture of workplaces/sporting clubs/etc.?

COVID-19 and the anti-gender movement in Europe: what is the impact of the current political situation on the response to gender-based violence in the future?

The emergency status declared all over Europe to face the exceptional circumstances of the COVID-19 crisis in 2020 has urged national governments to adopt urgent measures to support shelters and organisations helping survivors of gender-based violence. **In public discourse and media, attention to the impact of gender-based violence** during the lockdown seem to have increased, following also the launch of awareness raising campaigns in different countries (Cibin et al., 2021; Sandström et al., 2022).

If indeed awareness and political attention has increased, the nature and effects of such increased attention to the phenomenon of gender-based violence and the consequences of lockdowns and the economic crisis is yet to be understood. Still few EU Member States explicitly recognised gender-based violence against women as a form of discrimination or equality issue as required by the Istanbul Convention (De Vido and Sosa, 2021).

During the pandemic, governments and private actors have released funding to support shelters and generally organisations providing services for survivors of gender-based violence. Whether these changes in awareness and public/private intervention to support services will persist, what impact it will bring on the response to gender-based violence in the polycrisis context is also a matter for future research.

Research on the **quality of democracy in Europe** is a priority concern (see the list of [projects funded through Horizon Europe on democracy](#)), and the quality of democracy has an impact on policymaking and gender equality. Future research should focus on democracy and its relationship with gender equality from an intersectional perspective. In the background of this concern, the rising anti-gender and anti-feminist movement across Europe that links to the far-right action against sexual rights and against racial and ethnic minorities. The COVID-19 crisis has also appeared in a context of the emergence of populist and far-right governments across Europe and beyond. This new political setting has also opened the **space for backlashes** in the degree of protection of women's rights and freedoms in areas like reproductive rights and the rights of LGBTIQ+. An example is the Hungarian ban on abortion that was passed during the pandemic, and the Turkish withdrawal from the Istanbul Convention (March, 2021). Many narratives and expert opinions collected by RESISTIRÉ have stressed that this political backlash is having negative effects on people safety and respect for their rights and freedom (Sandström et al., 2022).

At the same time, at national and global level, feminist movements like the MeToo have been mobilising to expose systematic violations of human rights. In connection to this, the MeToo movement has contributed to shed light on patriarchal practices and systematic violence in sectors like sports and entertainment, but also the domestic care sector. In Greece, for example,

the feminist movement has led to increased awareness of gender equality issues among coaches and actors of the sports sector.

Future research would need to delve into the impact of this complex political landscape on policymaking, on social cohesion and democracy, on forms of social mobilisation, as well as on the resilience of human rights protection mechanisms.

Research Questions:

- To what extent does the quality of democracy in different countries affect the spread of anti-gender discourses?
- How did anti-gender discourses play out during the pandemic and in the current polycrisis context in different countries?
- How do anti-gender movements affect policies/policymaking/representation and services to support victims of gender-based violence against women and LGBTIQ+ communities?
- Has there been an increase in awareness and visibility of gender-based violence among society and policymakers? If so, what impact is it having on policy response and on social mobilisation? What forms of violence have been made more visible? Was there an improvement in the social and political understanding of the intersectional dimensions of gender-based violence?
- What is the impact of the anti-gender movement on the functioning of national and supranational monitoring mechanisms?
- What is the impact of feminist movements and campaigns across Europe on societal changes about the perception of gender-based violence? What is their impact regarding the anti-gender backlash?

Research on gender-based violence should include all different forms of violence and adopt an intersectional lens

The proposal for a EU Directive (EC, 2022) on combating violence against women and domestic violence adopts a **broad conceptualisation** of gender-based violence that encompasses sexual violence, including rape, female genital mutilation, forced marriage, forced abortion or sterilisation, trafficking in human beings for sexual exploitation, stalking, sexual harassment, femicide, hate speech and gender-based crimes and various forms of online violence ("cyber-violence"), such as non-consensual dissemination or manipulation of intimate material, cyberstalking and cyber-bullying.

While results in the third cycle have pointed at the impact of the pandemic on sexual and reproductive rights, future research should be careful to collect data on different forms and

dimensions of violence and the impact of crises on each of them. Data on forms such as female genital mutilation and forced marriage are missing, as well as data on scale and prevalence of gender-based violence perpetrated online. There is also limited quantitative data on the social and economic impacts of gender-based cyber violence on victims and other stakeholders (EPRS, 2021). EU-wide research on the legal approaches to the issue is still limited (De Vido and Sosa, 2021).

Research on scale and prevalence of each form of gender-based violence should also adopt an intersectional analysis and measure the impact on specific subgroups, such as women from minority groups, elderly women, and women with disabilities; and the prevalence of gender-based violence against LGBTIQ+ people. The proposed directive emphasises the need to strengthen victims' access to justice and victims' rights to adequate protection by responding directly to the specific needs of victims of violence against women and domestic violence.

Research should explore also the impact of the pandemic and other crises on gender-based violence in specific work sectors. Some data has been collected on gender-based violence in the garment industry², but further research is needed also in other sectors like health services and the domestic and care sector, a sector that, due to its characteristics (private setting, majority of vulnerable women involved, who are usually undocumented, etc.), pose specific challenges for prevention, protection and prosecution.

Research questions:

- What is the impact of COVID on female genital mutilation and forced marriages? To what extent does the fragmentation of EU regulation hinder the adoption of uniform and coherent measures to combat violence against women?
- What is the scale and prevalence of gender-based violence perpetrated online?
- What is the impact of gender-based violence in different sectors, e.g. domestic care sector, and health sector, in terms of prevalence and forms? What was the impact of the pandemic on violence perpetrated against these workers and its forms? Has it increased?

² ILO (2021). *Moving the Needle. Gender equality and decent work in Asia's garment sector*. Available at: https://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/documents/publication/wcms_789822.pdf

Conclusions

Despite a wealth of research and evidence on how COVID-19 and its policy and societal responses have increase, created new, and sometimes mitigated and reduced gender+ inequalities, major knowledge gaps remain. Some of these have been identified in the research agendas of the three cycles of RESISTIRÉ.

In this third cycle research agenda, the main knowledge gaps identified relates to gender+ inequalities in health, age and ageing, digitalisation, green spaces, civic responses, and gender-based violence. Some of these areas and inequalities have been in focus in much pandemic research, while others have not. The research agendas show that there is still an overwhelming need for empirical research on the impact of the pandemic from the perspective of the gender+ and inequality domains lens applied in RESISTIRE. The empirical research needed concerns both more basic research to better understand the effects of the pandemic, and also more applied research, i.e. seeking practical applications for research results obtained directed towards specific practical aims or objectives. In this section, however, we lift focus from the specific and sometimes narrow research questions in need of understanding, and present three overall directions for future research, relating to the need for counter-stories, innovative methods, and learnings from crisis.

A main overall conclusion from the analysis of pandemic research, knowledge gaps and future research questions, is the need to uncover, analyse and understand counter-narratives to crisis. Much of the pandemic research has focused on the negative effects of the pandemic and its policy and societal responses and on groups already vulnerable and disadvantaged by multiple inequalities. But significantly less attention has been paid to the counter-stories and 'better stories' of the pandemic. Such counter-stories can include individual and organisational agency, actions and practices, and actions and practices of inclusive feminist solidarity and support, that may mitigate inequalities and strengthen resilience of individuals, organisations, and societies. Counter-stories to the dominant narrative include actions and inspiring practices to cope with the pandemic, giving voice to otherwise less visible and marginalised groups. Better stories are those that challenge the dominant narrative and are inclusive and representative of marginalised communities, hence they have the potential to challenge established orders, truths, and power structures. Dominant narratives often exclude and marginalise certain groups of people, but by re-telling stories that are more inclusive and representative of marginalised communities, these dominant narratives can be disrupted, and the analysis contribute to the creation of more equitable and just societies. A research focus on better stories is therefore important in understanding the transition from social exclusion and marginalisation and in supporting the ability act and have an impact on society.

A second conclusion relates to the need for innovative research methods. In RESISTIRÉ, an

abductive approach, using a set of open-ended questions and the application of a broad theoretical framework has been the main theoretical approach. This abductive approach has meant gathering empirical data while simultaneously providing input for the development of the theoretical framework in a way which allows for the further refinement of existing questions and for the formulation of new questions in the following cycles. In this way an interplay and exchange between empirical data and theory have been achieved throughout the project, where inductive and empirically grounded approaches are dialectically combined with more deductive elements, developed from a theoretical perspective (Strauss and Corbin, 1990). This has enabled what have been called “systematic combining”, meaning the matching of theory with empirical findings that inform the directions and re-directions throughout the course of the project (Dubois and Gadde, 2002).

The research process has to a large extent been bottom-up and interactive (Callerstig and Lindholm, 2011) and the results have been collected, analysed and validated with the help of inequality experts from civil society, public authorities, academia, and from individual people throughout Europe sharing their professional knowledge and personal experiences of life during of COVID-19. In the three cycles different groups of informants have been invited to provide input related to their knowledge and experiences of inequalities during the pandemic and input on to how to interpret and address those experiences. The collaboration with practitioners, with their tacit practical knowledge of the problems studied, is an important element of the interactive research approach. In interactive research, researchers and practitioners work together, bringing in different and complementary knowledge. Practitioners contribute with a complex, practical, and contextual understanding, and researchers with a more theoretical and abstract understanding. The idea is that, while practitioners work to “solve” the problem practically, the researcher strives to gain new knowledge in order to develop theories and abstract models. In RESISTIRÉ, interaction with practitioners is an important part of the methodology. Concrete examples of these interactions were the workshops, but also the collection of narratives, which are important means for marginalised groups to be heard in a way that emphasise their own voices and can furthermore serve as a “consciousness raising tool” (Gunnarsson, 2006). It can counteract the internalisation of oppression and personal blame for a situation and instead shift the focus to the broader societal forces constraining the lives of individuals. Potentially, this can lead to an examination of the connections between behaviour, gender, other axes of oppression and social structures.

The Open Studios are an integral part of the RESISTIRÉ methodology, a vital participatory extension of the research approach applied in the project in which insights from research are not only stated as conclusions but transformed into directions for operational solutions for particular and complex inequalities resulting from the pandemic. The idea is to “build back better”, i.e., to not only provide solutions for immediate problems but to address their root causes. The interactive and participatory approach has been important also for this

step where the OS seeks to facilitate a process of joint analysis, learning together and the co-creation of solutions to be tested practically and by so contributing to the “elusive recipe for successful gender equality policy” (Mazur and Engeli, 2018: 112). One of the overall results from RESISTIRÉ thus relates to its approach which we see as a fruitful way of developing more robust understanding of complex societal inequalities in particular contexts, while at the same time having a strong potential to contribute to developing and testing responses to these challenges.

Finally, an overarching research field to develop, in light of pandemic research and innovation and crisis more generally, relates to the lessons learned from the pandemic in terms of the solutions/opportunities developed by individuals, civil society organisations and policy makers to overcome obstacles and inequalities. The overarching questions to address are what we can learn from policy and societal responses in times of crisis, what ways of organising societies that have worked well, and should be built on for a future - post-crisis - socially just and inclusive society?



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