

Tackling inequalities in public service coverage to “build forward better” for the rural poor

POLICY BRIEF BY THE
HLCP INEQUALITIES TASK TEAM



The **United Nations System Chief Executives Board for Coordination (CEB)**, chaired by the Secretary-General, is the longest-standing and highest-level coordination forum of the United Nations system, enhancing system-wide coherence and coordination in response to decisions adopted by legislative and governing bodies of United Nations system organizations.

The **High-level Committee on Programmes (HLCP)** is the principal mechanism for forging policy coherence and programme coordination on strategic policy issues facing the United Nations system, serving as the “think tank” for CEB and as a platform for interagency dialogue, sharing of best practices and developing common strategies.

In 2019, HLCP established an **Inequalities Task Team (ITT)** to strengthen the United Nations system’s leadership, coordination and impact on reducing inequalities and supporting SDG 10. Twenty-two United Nations entities are currently represented.

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- IFAD (activity co-lead)
- ILO
- IOM
- ITU
- OHCHR
- UNDCO
- UNDESA
- UNDP
- UNESCO
- UNFPA
- UN-Habitat
- UN Peacebuilding Support Office
- UN Women
- WHO (activity initiator and co-lead)

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Acronyms

CERD	Committee on the Elimination of Racial Discrimination
CRVS	civil registration and vital statistics
EQUIST	Equitable Impact Sensitive Tool
FAO	Food and Agriculture Organization of the United Nations
HEAT	Health Equity Assessment Toolkit
HLCP	High-level Committee on Programmes
ICT	information and communications technology
IDPoor	Identification of Poor Households
IFAD	International Fund for Agricultural Development
ILO	International Labour Organization
INFFs	integrated national financing frameworks
IOM	International Organization for Migration
ITT	Inequalities Task Team
ITU	International Telecommunication Union
OECD	Organisation for Economic Co-operation and Development
OHCHR	Office of the High Commissioner for Human Rights
SDG	Sustainable Development Goal
SDGia	SDG Impact Accelerator
UNCDF	United Nations Capital Development Fund
UNDCO	United Nations Development Coordination Office
UNDESA	United Nations Department of Economic and Social Affairs
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNSDG	United Nations Sustainable Development Group
WHO	World Health Organization

Executive summary

Globally, four out of five people living in extreme poverty – i.e., below \$ 1.90 a day (in 2011 purchasing power parity) – reside in rural areas, and 84 per cent of people experiencing multidimensional poverty also live in rural areas. The rural poor are among the populations at risk of being particularly negatively impacted by the concurrent health, social, economic, humanitarian and human rights crises caused by COVID-19. Inequalities have been growing in many countries in recent decades, and the COVID-19 pandemic has further heightened these disparities.

Even before these concurrent crises struck, the shared United Nations System framework for action on *Leaving no one behind: equality and non-discrimination at the heart of sustainable development* called for scaled up focus on the needs of the rural poor and specific subgroups among them at particular risk of being left the furthest behind. This is echoed by the United Nations Secretary-General's annual report on rural poverty.

In the context of building forward better for the rural poor, an increased focus on rural poverty and rural inequalities can serve to shift attention to the upstream causes of many of the global development challenges experienced today. Disinvestment in and neglect of rural development and the rural poor contributes to environmental degradation, global food insecurity, adverse public health consequences (including zoonoses outbreaks), mistrust in public authorities and social unrest, and mass out-migration (e.g. the rural poor become the urban poor), to name a few of the impacts. An increased focus on tackling rural poverty and reducing inequalities in rural areas across all sectoral domains does not detract from efforts

towards equitable urban development; rather, only by addressing poverty in both rural and urban areas, as well as improving rural-urban linkages and the role of intermediary cities, can the pathway to holistic national and global sustainable development be built.

Contributing to the above, this policy brief specifically focuses on tackling rural inequalities in public service coverage. Drawing evidence from across sectoral domains, the policy brief explores the manifestations of, causes of, and means to redress inequitable public service coverage *within* rural areas as well as *between* rural and urban areas. The primary target audiences for this policy brief are policy-makers, planners and development partners. Divided into three parts, the policy brief:

- provides an overview of select inequalities in public service coverage in rural areas and highlights specific subpopulations who, due to intersecting types of disadvantage, are most at risk of being left behind (Part I);
- conveys potential areas for action that are relevant across sectoral divides and are important for tackling inequitable public service coverage in rural areas (Part II);
- points the way towards advancing the agenda, synergizing with the United Nations Secretary-General's Call for Action on Human Rights, while delineating specific actions that the United Nations can take to improve coordination and focused support for transformative multisectoral rural development that tackles inequalities (Part III).

INEQUALITIES IN PUBLIC SERVICE COVERAGE IN RURAL AREAS

Inequalities in public service coverage are experienced by the rural poor, including for: land tenure services; banking and financial inclusion; infrastructure such as roads, irrigation systems, water and sanitation systems, and electricity; ICT and telecommunications; health services; education and lifelong learning opportunities; social protection, including for food security; and agricultural and market-oriented services, among other services. Examples of inequalities in service coverage in rural areas are given below.

- Rural people experiencing poverty
 - especially women, youth, indigenous peoples and other marginalized groups
 - typically have weak or unprotected tenure rights and insufficient access to well-functioning and efficient land tenure services.
- In developing economies, bank account ownership tends to be considerably lower in rural areas than in urban areas, with the majority of rural populations relying on informal financial providers. About half of unbanked people globally include women in poor rural households or those who are out of the labour force.
- Approximately 8 out of 10 people worldwide who lack access to basic drinking-water services live in rural areas, as do 7 out of 10 of those who lack basic sanitation services. Collecting water is a major source of unpaid care work for women and girls in rural areas.
- Available, affordable and reliable energy is pivotal for achieving rural development. In 2019, 759 million people globally still lacked

access to electricity, 84% of whom lived in rural areas.

- Each year, 3.8 million people, most of them women and children, die prematurely from illness attributable to the household air pollution caused by the inefficient use of solid fuels and kerosene for cooking. Access to clean cooking fuel and stoves remains much higher in urban areas, where 83 per cent of households have access, compared to rural areas where only 32 per cent have access.

“An estimated 2 billion people living in rural and remote areas across the world do not have adequate access to the essential health services they need within their communities”

- An estimated 2 billion people living in rural and remote areas across the world do not have adequate access to the essential health services they need within their communities.
- In low-income countries where every 100 urban residents complete secondary school, only 23 rural residents do so. In the context of COVID-19, nearly 500 million students from pre-primary to upper secondary school level did not have any access to remote learning – three-quarters of whom lived in rural areas.
- Globally, 72% of households in urban areas have access to the Internet at home, almost twice as many as in rural areas (38%). There are also inequalities within rural populations; for example, only 25% of users of digital agriculture solutions in sub-Saharan Africa are women.

- Today, more than 70% of the world's population still has no or limited access to comprehensive social protection, and coverage in rural areas is even lower. Taking the example of food security, small-scale farmers, agriculture workers and other rural people are disproportionately represented among the numbers of the poor and hungry, and nutritional status and dietary habits are often worse in rural areas than in the cities.
- Some subpopulations in rural areas have significantly lower access to agricultural and market-oriented services, influenced by gender, socioeconomic status, ethnicity, asset endowment and proximity to urban centres.

With 3.4 billion people globally living in rural areas, some rural inhabitants fare better in accessing and benefitting from quality public services than others. Inequalities in public service coverage within rural areas are driven by supply-side issues as well as demand-side compounding and intersecting factors associated with gender inequalities, ageism, discrimination based on ethnicity or other grounds, migrant status and disability, among other factors. Poor rural women may face a range of barriers to education and training, land tenure, banking, social protection and health services, while also being at risk of experiencing gender-based violence, excessive paid and unpaid workloads and limited possibilities for participation, voice and leadership in rural institutions. Children in rural disadvantaged communities are at much greater risk of child labour, child marriage and child trafficking, a situation exacerbated by weaker state capacity to address these issues in rural areas. Rural youth can experience limited access to quality education, vocational education and training due to financial, distance/transportation, infrastructural and organizational barriers. Due primarily (although not solely) to the age-selective nature of rural out-migration,

rural and remote areas in many countries experience higher levels of population ageing than urban areas, and consequently have a higher proportion of older residents. Barriers to services experienced by older persons can include ageism (e.g. against older farmers), inappropriate service design or unavailability of services, and transportation barriers, among others.

Stark inequalities can exist between indigenous peoples and non-indigenous populations in rural areas. OECD analysis shows that gaps in well-being between indigenous and non-indigenous peoples are typically larger in rural areas: the gap in the employment rate is, for example, at 8.6 percentage points in urban regions, while it is more than double – 18.4 percentage points – in rural regions. Rural Afro-descendants and other subpopulations experiencing discrimination can also face particularly pronounced inequalities. Cyclical internal migration between rural and urban areas is a prominent reality in many countries, yet service provision does not often facilitate a continuum of service usage for internal migrants. Many international migrant workers are in an irregular situation, precluding access to public services.

ENTRY POINTS FOR INCREASED AWARENESS AND ACTION

Tackling inequalities in public service coverage in rural areas can be advanced through investment in key areas, as follows.

- Advancing ***transformative rural development planning*** that is multisectoral, people-centred and human rights based, and which allows for spatial integration across sectors, accounts for complementary roles and development dynamics across rural, peri-urban and urban areas, and facilitates social inclusion and reduction of inequalities.

- Using “**rural proofing**” as part of **transformative rural development planning**, to enable the systematic application of a rural lens across different sectoral policies to ensure that they are adequately accounting for the needs, contexts and opportunities of rural women and men, while ensuring complementarity and synergies in investments across sectors.

- Establishing/reinforcing **data systems that elucidate who is being left behind** and permit transformative rural development planning to build on territorial data and knowledge that is sex and age disaggregated and georeferenced, grounded in the foundations of strong civil registration and vital statistics, and featuring analyses and dissemination of findings regarding the plurality of service providers.

- Ensuring **adequate human resources for public sector services in rural areas** with consideration of the specific requirements for development, attraction, recruitment and retention of public sector employees in these locations, and the opportunities to provide employment that can contribute to empowerment and social inclusion.

- Progressing towards **service delivery frontiers** that make use of technological and social innovations in rural and remote areas, as well as optimization of service organization and linkages at different levels.

- Facilitating strong equality-enhancing **public sector financing and budgetary management practices** through avoidance of austerity measures in the current crisis (i.e. maintaining fiscal support until economic recovery is assured), aligning budgets with the SDGs, strategic use of catalytic blended finance solutions, and reducing corruption, as well as a combination of additional

concessional financing, timely debt relief and transformative reforms.

- Raising **awareness of the security dangers of inequalities, disinvestment and weak state presence in rural areas**, given that public service delivery plays a key role in the maintenance and, in some contexts, reinstatement of trust in the government and its institutions.

- Strengthening **rural institutions, networks and organizations** for pluralistic service delivery and decentralization that delivers equitable development, by generating adaptive and innovative local governance with well-defined assignment of responsibilities across levels of government, accountability measures and adequate central transfers, fiscal systems and enabling frameworks.

- Fostering equitable **community engagement and social accountability**, including through capacity-building and platforms accessible to disadvantaged subpopulations in rural areas that may face challenges in participating due to adverse gender norms, distance, lower levels of literacy, language barriers and/or lack of access to computers or phones.

“Cyclical internal migration between rural and urban areas is a prominent reality in many countries, yet service provision does not often facilitate a continuum of service usage for internal migrants”

- Investing in **services that foster intergenerational inclusion**, i.e. services for rural youth, who are at a critical juncture to either stay and make a living in the rural area, or leave in search of alternative livelihood in urban centres, in addition to services for the increasing proportions of older people living in rural areas.

- Addressing **internal cyclical migration and the rural-urban continuum in service provision**, as rural-urban bidirectional movement by persons experiencing poverty is a reality, yet it is neglected by dominant development paradigms and, often, in the conceptualization of service delivery approaches.

- Investing in **intermediary cities** that are strategically located for meeting the needs of the rural poor and contributing to transformative rural development, i.e. through building/safeguarding human, social, political and natural capital in rural areas through their role in service provision.

- Investing in **services that safeguard and strengthen natural capital**, as these services promote environmental protection and wise natural resource management, and

can generate both employment and public goods while also being fundamental for longer term sustainable development, in particular in the face of climate change.

ADVANCING THE AGENDA

In both the policies and programming of national authorities and the multilateral system, more can be done – across sectoral domains – to support transformative rural development and reduce rural inequalities in public service coverage. Due attention is required to ensure that sectoral policies and support/investments for services not only account for the needs of the rural poor, but that they do so in ways that maximize complementarities across sectors. This policy brief closes with a proposal for further joint work by the United Nations system on this area, entailing: a consolidated package of policy and programming support; improved knowledge management; joint work in countries; guidance for rural proofing; reinforced partnerships; and leveraging existing United Nations programming and reporting mechanisms for improving coordination and communication/awareness-raising for tackling rural inequalities.

Introduction

ABOUT THIS POLICY BRIEF

The concurrent health, social, economic, humanitarian and human rights crises caused by COVID-19 have abruptly impacted progress towards many of the Sustainable Development Goals (SDGs) and, in some cases, turned back years of progress (UNDESA, 2020a & 2020b). Populations that were experiencing poverty and social exclusion before the crises are now made even more vulnerable (United Nations, 2020a). Pervasive inequalities (in terms of income, assets, opportunities, access to services, employment) are being magnified and they have adverse social, economic and political consequences. Inequalities have been growing in many countries in recent decades, and the

COVID-19 pandemic has further heightened these disparities; income inequalities in particular are predicted to increase in many countries, thus endangering progress made towards SDG 10 (Deaton, 2021; ILO, 2021a; Georgieva, 2020; Stiglitz, 2020; World Bank, 2020).

The rural poor are among the populations most at risk of being negatively impacted by the COVID-19 crisis, as described in Box 1. In addition, the long-term effects of the global economic recession risk further exacerbating rural extreme poverty and rural-urban inequalities during the months and years to come. Therefore, a greater focus on rural areas is needed for achieving the goal of eradicating global poverty (SDG 1), as well as for reducing income inequalities (SDG 10) and reducing inequalities across all other SDGs.

Box 1. The impact of COVID-19 on the rural poor

In the concurrent COVID-19 crises, the incomes of those living in rural areas have become even more insecure as many rural people are involved in the informal economy, and/or depend on off-farm activities for which interrupted transportation and closures pose serious challenges (Bundervoet, Dávalos & Garcia, 2021; CGIAR, 2020). Those in informal employment, and self-employment in particular, were the most affected during 2020 as jobs were lost or their quality deteriorated (Bundervoet, Dávalos & Garcia, 2021; ILO, 2020e). Their incomes are decreasing while food prices rise, forcing poor households to further reduce the quality and diversity of their diet, or even reduce food consumption overall (FAO, 2020a & 2020b; IFAD, 2020a). The pandemic is also undermining rural women's jobs and income-generating potential due to lockdowns of affected areas, market disruptions and the slowdown of agricultural supply-demand chains (UN Women, 2020a). As rural populations, particularly women and girls, already have limited access to many services that underpin fundamental human rights and the SDGs – including safe drinking water and adequate sanitation, health services, education, mobile broadband network, the Internet and communications technology, social protection and public infrastructure – they are disproportionately affected by the economic and other consequences of the pandemic. In addition, as they often have lower coverage with income replacement benefits, they are highly vulnerable to income poverty in the event of a loss in labour earnings (ILO, 2021a).

The United Nations publication *Leaving no one behind: equality and non-discrimination at the heart of sustainable development: a shared United Nations System framework for action* (United Nations, 2017a) explicitly highlights the need to do more to address the needs of people experiencing extreme poverty, including in rural areas. The latest available data suggest that extreme poverty and multidimensional poverty are overwhelmingly rural. Globally in 2018, four out of five people living in extreme poverty – i.e. below \$ 1.90 a day (in 2011 purchasing power parity) – were living in rural areas, despite rural people representing only 48% of the world’s population. Even before the COVID-19 pandemic, the share of rural poor among the total population of the extreme poor had increased by more than two percentage points between 2015 and 2018 (World Bank, 2020). Multidimensional poverty is also more intense in rural areas. According to the global Multidimensional Poverty Index¹ of 2021, 1.3 billion people across 109 developing countries lived in multidimensional poverty, with 84% of these living in rural areas (UNDP & OPHI, 2021).

It is against this backdrop that this brief addresses priorities for building forward better for the rural poor, with a focus on public service coverage. Drawing evidence from across sectoral domains, the brief explores the manifestations and causes of inequitable public service coverage *within* rural areas as well as *between* rural and urban areas. It also explores how this can be remedied, concentrating on intervention areas that can have multiplier effects in terms of investment in human and social capital, while also safeguarding human rights and

reducing inequalities. In stimulus planning and considering a long-term view to build back better, it is timely to sow the seeds now for approaches to sustainable rural development that decreases inequalities in rural service coverage.

The target audiences for this brief are policy-makers, planners and development partners with a remit for cross-sectoral rural development planning, and/or those who oversee sector-specific domains and are charged with ensuring that the rural poor are not left behind. This brief will also be shared with all United Nations country teams globally, given their role in supporting national authorities in the current context of response and recovery to the COVID-19 crisis.

A WORD ON DEFINITIONS

The data featured in this brief for rural areas have been consolidated from different sources that use a range of methods. The approach is not standardized, because different disciplines and countries use a wide variety of measurement approaches to define *rural*. Currently, national-level definitions for rural areas often combine demographic (density), distance/proximity to cities, and economic (prevalence of agriculture in the local economy) factors as well as defining rural in relation to what it is not, i.e., a rural area can be considered as a geographical region outside the urban agglomeration (IFAD, 2019a; ILO, 2018a; UNESCO, 2021a). The latter approach (i.e. “rural is not urban”) has received criticism for undermining rural development and exemplifying the role of definitions in

¹ The global Multidimensional Poverty Index is an international measure of acute multidimensional poverty. It complements traditional monetary poverty measures by capturing the acute deprivations in health, education, and living standards that a person faces simultaneously. There are many ways of measuring multidimensional poverty. Some national multidimensional poverty indices also capture disempowerment, poor quality of work, the threat of violence, and living in areas that are environmentally hazardous, among other types of deprivation.

disempowerment (Balfour et al., 2012; Couper, 2018). Considering such criticisms, this brief elaborates on other aspects of rurality and place-based identity, hence contributing to a discourse on the definition of rural which is assets-based rather than deficit-based and which accounts for the need to move away from the rural versus urban dichotomy given population movements between the two (UN-Habitat, 2018).

At the fifty-first session of the United Nations Statistical Commission, a recommendation was set for methods to delineate cities, urban and rural areas for international statistical comparisons. The proposed “Degree of Urbanization” method classifies the entire territory of a country into three classes: 1) cities; 2) towns and semi-dense areas; and 3) rural areas. This method has two extensions. The first extension identifies:

cities, towns, suburban or peri-urban areas, villages, dispersed rural areas and mostly uninhabited areas. The second extension adds a commuting zone around each city to create a functional urban area or metropolitan area (European Union/FAO/UN-Habitat/OECD/World Bank, 2021; United Nations, 2020b).

Public services in this brief refer to services organized by the government for the benefit of all people within its territory, reflecting national and subnational laws. It can be noted that governments may interface with other service providers (e.g. the private sector, nongovernmental organizations, etc.) for enhancing access and the delivery of specialized services, as well as ensuring the quality of services provided in a regulatory capacity. While it is a non-exhaustive list, Box 2 provides examples of the types of services addressed by this brief.

Box 2. Examples of services addressed by this brief

- Administrative services (e.g. driving license)
- Agricultural extension and market-oriented services
- Civil registration (e.g. birth and death registration, marriage registration)
- Culture, parks and recreation services
- Drinking water services, and other services related to water management (e.g. irrigation)
- Education services
- Emergency services
- Employment-related services (e.g. labour market insertion programmes, occupational health and safety services)
- Energy services (e.g. fuel and electrification)
- Environmental protection and natural capital services (e.g. nature preserves, hunting controls)
- Financial services
- Fire protection services
- Health services
- Information and communication technology (ICT) services and telecommunications
- Land tenure services
- Legal and judiciary services, notary services
- Police/civil protection services
- Regulation services/quality control of private service providers
- Sewage and waste management services
- Social protection and welfare services
- Transportation and road services

Part I: Inequalities in public service coverage in rural areas

Overall, and when compared to the urban poor, the rural poor have less access to basic and productive services, a reality which undermines their basic human rights while also hampering human capital and economic development, social capital and well-being, natural capital and resource management, and political capital and governance capacity in rural areas. Reasons for lower access to public services include the limited availability and quality of these services in many rural areas as well as compounding and intersecting barriers linked to poverty and social exclusion. When unavailable in rural areas, often these services can only be accessed in distant and geographically prohibitive urban centres, with travel time and costs posing challenges (Cattaneo, Nelson & McMenemy, 2021). Moreover, as pointed out in the *World social report 2021*, access to services in rural areas (as elsewhere) often varies depending on gender, socioeconomic status, ethnicity, asset endowment and other factors, creating intersecting and compounding barriers for populations experiencing discrimination and other forms of disadvantage (United Nations, 2021). This section gives specific examples of inequalities (between rural and urban areas) in public service coverage across different sectors, and highlights how some rural subpopulations are particularly at risk of being left behind due to compounding and intersecting factors.

INEQUALITIES IN RURAL AREAS

Inequalities are multidimensional, multi-layered, cumulative and influenced by the

development process itself (UNDP, 2019; UNDP & OPHI, 2019). Broadly speaking, there are four sources of inequality within rural areas: resources, resilience, relationships and rights (IFAD, 2018). Coverage with public services in rural areas influence – and is influenced by – each of the four sources, with one inequality often amplifying another, as described below. As violence is both a result and a cause of inequalities in rural areas, it has also been added to this list as a cross-cutting dimension.

- **Resources.** In rural areas, communities, households and individuals have unequal access to resources (such as income, land, inputs, capital, technology, services such as health and education, and public transfer payments), unequal ability to use these resources, and unequal ownership of them. There is also a strong association between inequality in a resource and inequalities in health, education and nutrition, with each influencing the other. Inequality of opportunities (livelihoods) and inequality of outcomes (living standards and well-being) are, therefore, two sides of the same coin. Without equal opportunities made possible through investing in capabilities of individuals and the potential to benefit (on an equitable basis according to rights and needs) from public services, systematic patterns of discrimination and social exclusion will continue to prevent disadvantaged groups or individuals from accessing public services.

- **Resilience.** Rural households and their communities tend to rely on natural capital

and ecosystem services for their livelihoods and well-being more than most other groups, while at the same time typically having to contend with weaker government investments in their human capital. This is particularly true for women, who are more dependent on environmental goods, but have less access to them. Rural populations are the most affected by (and often lack the ability to cope with) environmental degradation, climate change and extreme weather events, and economic shocks and risks, particularly in the absence of social protection and financial services (FAO, 2021). Poor rural households are highly exposed to shocks since their livelihoods depend on an increasingly deteriorating natural resources base and volatile climatic and market conditions. Their limited assets and risk management strategies make them particularly vulnerable. The combination of exposure and vulnerability to shocks can create a vicious cycle of poverty or prevent rural households from moving out of poverty and exacerbate inequalities.

- **Relationships.** Social relationships and networks are a key determinant of an individual's ability to access resources and cope with shocks. Social relationships in many rural communities have been strained by poverty, lack of opportunities, outmigration, gender inequalities including gender-based violence, discrimination and the remnants of historical factors such as colonialism or feudalism. While each rural community differs, unequal power relationships tend to underlie other inequalities, and are linked to discrimination based on gender, age, disability, ethnicity, migrant status and other grounds, as well as to factors including cultural norms and traditions and resource accumulation. If perpetuated, these unequal relationships can lead to intergenerational poverty and immobile social classes, creating a vicious

cycle of poverty and inequality passed on from generation to generation.

- **Rights.** Public services in rural areas enable the fulfilment of basic economic, social and cultural rights. When such services are absent or inadequate, they jeopardize key rights such as the right to healthy and nutritious food, to education, to health, to social protection, to cultural life, to water and sanitation, and to work. Political rights, representation and agency – ensured through the inclusive design, enactment and enforcement of laws and policies – are fundamental for inclusion and to achieve equality, particularly with regard to labour, land and public services accessibility for marginalized groups such as women, older people, youth and indigenous peoples. In a context of inequality in terms of income, power and access to services, these rights may be at risk.

“Poor rural households are highly exposed to shocks since their livelihoods depend on an increasingly deteriorating natural resources base and volatile climatic and market conditions”

- **Violence.** Horizontal inequalities among groups are important risk factors for violence and social tensions (United Nations & World Bank, 2018). Inter-group inequalities often coincide with spatial inequalities and populations in (remote) rural areas feeling/being marginalized and excluded. This has been the case in several countries that have had or are in the middle of civil conflicts or have experienced high levels of violence in rural areas. In addition,

perpetuated insecurity and fear, lack of the rule of law, the threat of physical harm and the disintegration of social cohesion exacerbate all inequalities. Hence, violence is both a result and a cause of inequalities experienced by the rural poor. Strengthening the equitable delivery of public services across regions within a country can be part of a strategy to prevent violence.

EXAMPLES OF INEQUALITIES IN SERVICE COVERAGE ACROSS DIFFERENT SECTORS

While it is beyond the scope of this brief to describe inequalities in all of the public services that are required to enable rural populations to realize and fulfil their fundamental human rights, the following subsections provide selected examples. While highlighting the inequalities, these examples also describe the rationale for investing in closing the gap in coverage, both in light of the benefits for the rural poor and the benefits for wider national development aims.

Examples of inequalities in service coverage across different sectors

Rural people experiencing poverty – especially women, youth, indigenous peoples and other marginalized groups – typically have weak or unprotected tenure rights and insufficient access to well-functioning and efficient land tenure services (United Nations, 2017a). Globally, 40 per cent of countries have at least one restriction to women’s property rights in law (World Bank, 2018a). Land tenure services can comprise land acquisition and distribution or leasehold operations. Land tenure systems require transparent and fair procedures to recognize rights, allocate land, demarcate and title land, and protect from intrusion. Land is the basis for food production and a central factor for wealth accumulation, power, and

influence in society. In the case of indigenous peoples, the formalization of indigenous property rights is positively associated with improved economic outcomes (OECD, 2019).

Recent evidence has pointed to the highly unequal distribution and growing concentration of land at global level (Lowder, Sánchez & Bertini, 2021). Using the most recent agricultural census and survey data available, Lowder, Sánchez & Bertini (2021) found that despite small farms (of 2 hectares or less) representing 84% of total farms in the world, they operate only 12% of total agricultural land. In contrast, the largest 1% of farms (those of 50 hectares or more) operate more than 70% of the total agricultural land. In addition, agricultural wage workers – often with no or very limited access to land – experience the highest incidence of working poverty, with a quarter of them in extreme poverty (ILO, 2020a). Lack of formal documentation (identity cards, passports) among migrant populations in rural areas can pose a challenge to achieving security of tenure as well as demonstrating legal identity (United Nations & World Bank, 2018).

Increasing inequalities in the accumulation of land are compounded, in some areas, by rising population growth, rapid urbanization, climate change, declining soil fertility and increasing demand for food and fuel. Land tenure services, combined with access to information, extension and market-oriented services, enable greater agricultural productivity and food security, improved access to markets, increased family incomes and more sustainable land use. It also contributes to empowerment and conflict prevention as well as helping to reduce migration to urban centres. For indigenous peoples, access to the land is a precondition for them to survive and enjoy their fundamental rights. The displacement of indigenous peoples against their will from their traditional territories has a deleterious effect on their health and well-being.

Inequalities in financial inclusion

Financial inclusion is widely regarded as a catalytic tool to unlock development opportunities and improve lives, especially for the rural poor (UNSGSA, 2021). A key factor for why low-income individuals are trapped into a cycle of poverty and vulnerability is their lack of credit and inability to borrow to invest in skills and productive assets, alongside their disproportionate exposure to risks such as disasters, climate impacts and ill health. In developing economies, bank account ownership tends to be considerably lower in rural areas than in urban areas, with the majority of rural populations relying on informal financial providers (e.g. family, friends, informal moneylenders) to see their financial needs satisfied (Demirgüç-Kunt et al., 2017). Weak availability of formal financial services in rural and remote areas is a key reason for this. In contrast to urban areas, commercial banks often hesitate to establish any presence in rural and remote areas due to the lack of infrastructure, the absence of in-depth, granular information on clients, a diffused (perceived bias) of agriculture as a highly risky sector, low levels of financial education among rural clients, and the complexities behind the credit repayment cycles that underpin different crops and value chains (IFAD, 2019b).

While it may be challenging for financial service operators to consider opening a bank in every small village or town, a range of options exist including agent banking (i.e. forming partnerships with post offices or retail shops), mobile money services or village-located ATMs (Demirgüç-Kunt et al., 2017). In particular, financial technology (FinTech) innovations have opened up new ways for rural people to access financial services. All of these options require a strong ICT infrastructure (which may be a challenge for certain subpopulations, given their circumstances), appropriate regulation, consumer protection and adequate levels

of digital literacy in rural areas. In addition, various community-based financial institutions, such as savings and credit cooperatives, can provide opportunities for financial service provision for the rural poor (ILO, 2019b). In this context, in 2021, the **SDG Impact Accelerator (SDGi)** is supporting 20 start-ups from seven different countries in Digital Agriculture and Financial Inclusion programmes. In 2021, the focus of the **SDGi** is on providing agriculture and investment solutions to rural areas, for example, to smallholder farmers, micro-, small and medium-sized enterprises or projects that promote financial literacy.

“About half of unbanked people globally are women in poor rural households or those who are out of the labour force”

Within rural areas, gender and other inequalities also contribute to lower levels of financial inclusion. About half of unbanked people globally are women in poor rural households or those who are out of the labour force (Demirgüç-Kunt et al., 2017). Challenges for business development and financial inclusion are amplified in the case of indigenous entrepreneurs and communities for a number of reasons (OECD, 2019). Collateral can be difficult because in some jurisdictions indigenous peoples living in traditional settlement areas do not typically own land or their home, which is a common way for small business owners to secure financing. Historical dependency on government transfers for housing and income has also resulted in a weak credit history. Discrimination and cultural bias may also be a challenge, resulting in lenders or investors being unwilling to even consider funding indigenous communities or individuals.

Inequalities in basic infrastructure and transportation systems

In many countries, the provision of reliable and effective infrastructure in rural areas remains a major challenge, particularly in the most disadvantaged rural areas. Infrastructure assets such as rural roads, tracks, bridges, irrigation schemes, water and sanitation systems, schools, health centres, electricity systems and markets are often found to be lacking or inadequately maintained in rural areas.

Water and sanitation services are a striking example ((WHO & UNICEF, 2021; UNICEF & WHO, 2019). Approximately 8 in 10 of people worldwide who lack access to basic drinking-water services live in rural areas, as do 7 out of 10 of those lacking basic sanitation services (WHO & UNICEF, 2021). Women and girls are responsible for water collection in 8 out of 10 households with water off premises, contributing to high levels of unpaid care work and reducing time available for paid work, education or leisure (WHO & UNICEF, 2017). Many rural jobs and livelihoods depend on water, and these are being threatened by increasing water scarcity and water supply (ILO, 2019c). Because of poor management of small-scale water supplies and on-site sanitation facilities, 1.4 billion people living in rural areas in 2020 collected drinking water from faecally contaminated sources (WHO & UNICEF, 2021). Application of risk management tools such as water and sanitation safety planning, adapted for small systems, could reduce this number and reduce the burden of disease from waterborne pathogens, while at the same time protecting the environment and, in many cases, saving money (WHO, 2012; WHO, 2015d).

Targeted investment areas that contribute to the reduction of inequalities and increased opportunities in service provision across sectoral domains include transport and telecommunication infrastructure. Transport

can improve the connection between service providers and the lower income groups often residing in rural and remote areas. Road infrastructure and public transportation services play a key role in improving regional connectivity between cities and rural areas and facilitating the secure flow and movement of goods, services and labour benefits by reducing constraints to movement of people and goods (UN-Habitat, 2020). Also, telecommunications connectivity can reduce dependence on physical infrastructure and can enable wider access to services, economic activities and productive opportunities. For effective ICT services and applications in rural areas (which are covered in a subsequent section of this brief), it is important to focus on cost-effective, reliable and fast deployment infrastructure. The role of innovative wired and wireless technologies such as new power transmission systems would provide easy and cost-effective solutions for transmitting information and power across difficult terrain in many rural areas by removing the need for traditional lines. Cellular base stations require power from the grid and/or a green source of power e.g. off-grid power. The connection from the grid to the cellular base station is expensive and takes excessive time in comparison to the time taken to install a base station itself.

Addressed by SDG 7, available, affordable and reliable energy is pivotal for achieving rural development. In 2019, 759 million people globally still lacked access to electricity, 84% of whom lived in rural areas (IEA, IRENA, UNSD, World Bank & WHO, 2021). Before the pandemic only 40% of people living in sub-Saharan Africa had access to electricity, with rural areas generally far behind urban areas. Inequalities in access to electricity contributes to social exclusion in rural areas; for example, lack of electricity hinders access to electricity-dependent assistive technology (United Nations, 2019a).

Inequalities in access to health services

For many health indicators, rural and poor populations experience worse health outcomes and lower service coverage than their urban and more advantaged counterparts. For example, in one third of 47 low- and middle-income countries studied, the under-five mortality rate was higher by 20 deaths per 1000 live births in rural areas than in urban areas (WHO, 2021a). The prevalence of stunting is higher in rural areas and in the poorest households (FAO, IFAD, UNICEF, WFP & WHO, 2020; WHO, 2015b). People with noncommunicable diseases (NCDs) such as cardiovascular disease, cancer, diabetes and chronic obstructive pulmonary disease can face greater challenges in accessing timely and appropriate services in rural areas.² Inequalities such as these are a result of weaker health systems in rural areas and adverse social and environmental determinants of health.

An estimated 2 billion people living in rural and remote areas across the world do not have adequate access to the essential health services they need within their communities (WHO, 2021b). Rural health service provision is challenged by supply-side factors including, but not limited to, shortages in adequately trained health workers, lack of economies of scale and higher costs for delivery of services, geographic remoteness and distance, weak supporting infrastructure (e.g. water, sanitation, electrification and ICT) and lack of culturally and linguistically appropriate services (ILO, 2020b; ILO & FAO, 2021; Koller, 2019; OECD, 2021; United Nations, 2020c; WHO Regional Office for Europe, 2010; WONCA, 2021;). These factors are compounded by demand-side issues including, but not limited to, transport barriers, opportunity costs, poverty and financial

barriers, gender inequalities and other language, cultural and social norms, and lower education rates. Rural women and girls are particularly impacted (UN Women and UN, 2020). They have specific health needs, and they can face a range of barriers in accessing quality health services, essential medicines and vaccines, maternal and reproductive health care, and/or financial protection (UN Women and UN, 2020). Populations that have been displaced due to natural disasters or conflicts, as well as migrant communities, often reside in rural border areas and are often at risk of exclusion from health services. They may also face unique financial, legal status and cultural/linguistic barriers to access health services (IOM, 2010; IOM, 2015).

“Rural populations tend to experience a higher incidence of impoverishing health spending (i.e. spending more than 25% of the household budget on health) than those in urban areas”

Estimates by ILO from 2015 show that 56% of the population living in rural areas are without legal health coverage (e.g. they do not have legal entitlements to health services), which is 2.5 times higher than the rate in urban areas (ILO, 2015). Rural populations also tend to experience a higher incidence of impoverishing health spending (i.e. spending more than 25% of the household budget on health) than those in urban areas (WHO & World Bank, 2019). There is a current and predicted worsening shortage of health workers in rural and remote

2 This is also related to an over-reliance on the centralization of services. For more complex NCD services, prioritization of tertiary facilities over secondary facilities can contribute to excessive delays, interruptions or abandonment of therapy, which are more common for the rural poor.

areas, and a current underinvestment in the development and training of multidisciplinary fit-for-purpose health teams and in the attraction and recruitment of health workers in rural areas (WHO, 2021b). Concerns relating to decent work deficits and social protection gaps are among the reasons frequently cited for challenges in attracting and retaining highly skilled health workers to rural and remote areas (ILO, 2017; WHO, 2021b).

“Even when health care facilities are located in rural areas, there is often a gap in specialized health services, such as rehabilitation and mental health services”

There is a need to invest in primary health care-oriented health systems strengthening and, in particular, to adapt integrated service delivery founded on primary care and public health to the unique situations of rural areas (i.e. fewer health workforce, less specialized care, less infrastructure). Such efforts will help to close service coverage gaps and reduce inequities in health outcomes (WHO & UNICEF, 2018; WHO & UNICEF, 2020a). Even when health care facilities are located in rural areas, there is often a gap in specialized health services, such as rehabilitation and mental health services. There are reports of shortages in rehabilitation personnel in rural and remote areas of both high-income and low-income countries. Travelling to secondary or tertiary facilities in urban centres can be costly and time consuming, and public transport is often not adapted for people with mobility difficulties (WHO & World Bank, 2011).

In addition, there is a need to work across sectors to apply a Health in All Policies

approach (WHO, 2015c) and collaborative intersectoral solutions. For example, 9% of health care facilities in rural areas, compared to 2% in urban areas, have no water service, meaning they have either no water source or collect water from unprotected sources such as open wells, springs and surface water (WHO & UNICEF, 2020b). A second example relates to occupational health services. In almost a quarter of all countries with data, agriculture appears among the top three sectors in terms of the share of fatal occupational injuries (ILO, 2020c). Despite their increased risk of injury, agricultural workers often lack access to the necessary occupational health, information and training services to adequately respond to these health hazards (FAO, 2020c). There is a need for more countries to successfully integrate basic occupation health services into primary health care, as done in Thailand (ILO, 2006), the Islamic Republic of Iran (Rafiei, 2015) and Brazil (Gomez, Fedal de Vasconcellos & Machado, 2018). A third example of the need for a Health in All Policies approach is indoor air pollution. Each year, 3.8 million people, most of them women and children, die prematurely from illness attributable to the household air pollution caused by the inefficient use of solid fuels and kerosene for cooking (WHO, 2018a). Access to clean cooking fuel and stoves remains much higher in urban areas, where 83 per cent of households have access, compared to rural areas where only 32 per cent have access (WHO, IEA, GACC, UNDP, EnDev & World Bank, 2018).

Box 3 describes how underinvestment in and underdevelopment of rural health systems has influenced the capacity to respond to COVID-19. As described in Part II of this brief, the lack of adequate attention to the One Health approach across sectors in rural areas must be redressed to help to prevent future zoonoses outbreaks.

Box 3. COVID-19 and the impact of underinvestment in rural health services

COVID-19 has exposed and magnified chronic underinvestment in health systems and health determinants particularly in rural disadvantaged areas, in both low- and middle-income countries and high-income countries. In many countries, the COVID-19 response in rural areas has been hampered by: inadequate numbers of appropriately trained health professionals; poor facilities and infrastructure, including limited capacity in rural clinics to treat severe disease manifestation requiring intensive care; shortages of key health products such as testing kits, personal protective equipment and vaccines; weak referral systems and inadequate safe medical transportation; weak information systems and civil registration in the case of deaths; and barriers to financial, geographical and organizational accessibility of public goods and services. WHO's "pulse surveys" aim to track continuity of essential health services during the COVID-19 pandemic; while their data do not show rural/urban differences, they show considerable disruption in services for diseases that disproportionately impact the rural poor such as neglected tropical diseases and malaria.

The myth that rural areas are protected from COVID-19 has not lent itself to remedying these issues, despite emerging evidence suggesting that population connectivity (e.g. community, transportation, housing and economic relationships) and crowding (e.g. social gatherings, large intergenerational households or workplaces with limited ventilation and inadequate water and sanitation) may be more important than population density in disease transmission. Rural pockets with high community connectivity and crowding may be particularly vulnerable, given that they also often experience lower access to quality health services (thus resulting in higher mortality). For example, indigenous populations in the Americas – many of whom live in rural areas and experience overcrowded and multi-generational housing, poorer health outcomes, and limited access to health services and infrastructure – have experienced disproportionate rates of infection and mortality during the COVID-19 pandemic.

In some countries, the loss of livelihood opportunities in urban areas has also resulted in the reverse migration of urban populations to rural areas where agricultural activities are seen as providing better chances of survival compared to informal economic activities in big cities. In this situation, the likelihood of exposure to SARS-CoV-2 (the virus that causes COVID-19) increases in rural populations while the chance of obtaining adequate care decreases. In addition, in some sectors in rural areas (e.g. meat processing and packing) workers have been particularly hard hit, in multiple countries, underlining the need for strong occupational health and safety measures in rural areas to combat the pandemic. Meanwhile, the lack of social protection (e.g. sick leave, health insurance, financial support during periods of lockdown) for many of the rural poor employed in the informal economy pose additional threats to health.

Sources: Ali et al., 2020; Arrazola et al., 2020; Hamidi, Sabori & Ewing, 2020; Hsu, 2020; ILO, 2020b; ILO, 2021b; OECD, 2020a; Ogunkola, 2020; Ponticello, 2020; Ranscombe, 2020; Siedner, 2020; Singh, 2020; WHO, 2021c.

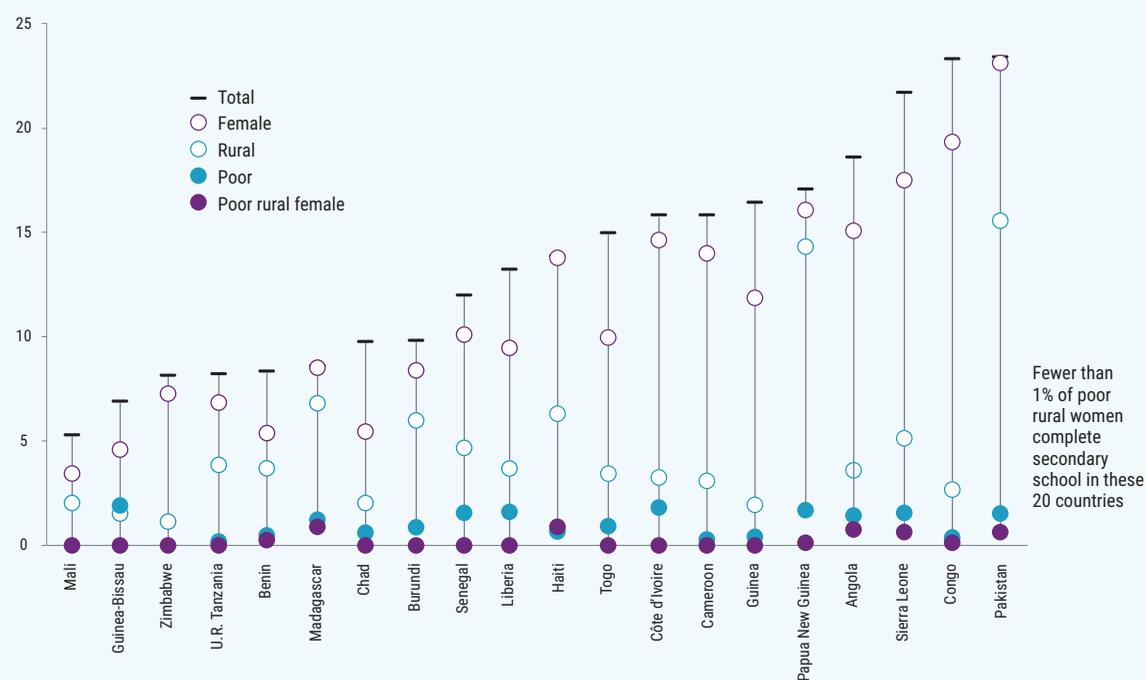
Inequalities in access to quality education and lifelong learning opportunities

Beyond its intrinsic importance as a fundamental right, education and lifelong learning is key for transforming people’s lives and society as well as for addressing immediate and structural issues related to inequalities. Children, young people and adults in rural areas, however, tend to face inequalities in education and learning, which intersect with other forms of inequalities. The international community has committed to achieving the targets of SDG 4. For children, this means ensuring “access to and completion of at least 12 years of free, publicly funded, inclusive and equitable quality primary and secondary education, of which at least nine years are compulsory” (UNESCO, 2015).

Despite these commitments, in low-income countries, analyses of recent survey data indicate that where every 100 urban residents complete secondary school, only 23 rural residents do so (UNESCO, 2020a). In at least 20 countries with data for 2013–2018, mostly in sub-Saharan Africa, less than 1% of poor, rural young women completed upper secondary school (UNESCO, 2020a), as shown in Fig. 1. The minimum one year of free and compulsory pre-primary education of good quality (SDG target 4.2) is still far from a reality for those children most in need, even in countries that provide universal legal entitlement. Educational inequalities also persist for young people and adults. In many countries, adults in rural areas are less literate and have lower accessibility to learning opportunities than urban residents (UNESCO, 2020a).

Fig. 1. Inequalities in education for poor, rural young women in selected countries, 2013–2018

In at least 20 countries, hardly any poor, rural young woman completed upper secondary school
Upper secondary school completion rate, by sex, location and wealth, selected countries, 2013-2018



GEM StatLink: http://bit.ly/GEM2020_fig3_1
Source: World Inequality Database on Education

Sources: UNESCO, 2020a.

Educational inequalities are multifaceted, involving issues at both the education system level and the provision level. At the system level, national policies, financing, governance and accountability mechanisms can serve to address urban-rural disparities. However, an example analysis of financing policies showed that only 17 out of 78 countries, or about 1 in 5, had a clear equity focus in education, and this was not the case in many low-income countries (UNESCO, 2020a). At the programme level, inequalities are prevalent as reflected in the availability, accessibility, acceptability and adaptability of educational services (UNESCO, 2021b). While education and other infrastructure remain inadequate in many rural areas, accessing the available learning opportunities will continue to be a challenge due to factors such as distance to school, the unaffordable costs of education and the digital divide.

The quality of education in rural schools tends to be lower than in urban settings due to a range of issues, including insufficient qualified, trained teachers and relevant learning materials, use of inappropriate languages of instruction, lack of safe and enabling learning environments, and limited exposure to literate environments. Addressing inequalities in education and learning in rural areas as a matter of rights and dignity, as well as to ensure the equitable distribution of a global common good, requires comprehensive efforts that encompass issues at both the education system and provision levels.

The COVID-19 crisis has magnified pre-existing inequalities in education and learning, hitting learners in rural areas especially hard. According to United Nations estimates, nearly 500 million students from pre-primary to upper secondary school level did not have any access to remote learning – three quarters of whom lived in rural areas (UNESCO, 2020b). The gender digital divide means that rural girls

have especially limited access (UN Women, 2020a). Targeted measures, appropriate legal and policy frameworks, and equitable education financing are critical to respond to the increased marginalization of rural areas and poorer households as a result of COVID-19.

Inequalities in access to ICT and telecommunications

Despite the ongoing “internetization” of rural areas with investments in broadband infrastructure and the adoption of digital solutions by service providers, access to the digital world remains unequal. While virtually all urban areas in the world are covered by a mobile broadband network, gaps in connectivity and Internet access persist in rural areas. Globally, 72% of households in urban areas have access to the Internet at home, almost twice as many as in rural areas (38%) (ITU, 2021). There are also inequalities within rural populations; for example, only 25% of users of digital agriculture solutions in sub-Saharan Africa are women (CTA, 2019).

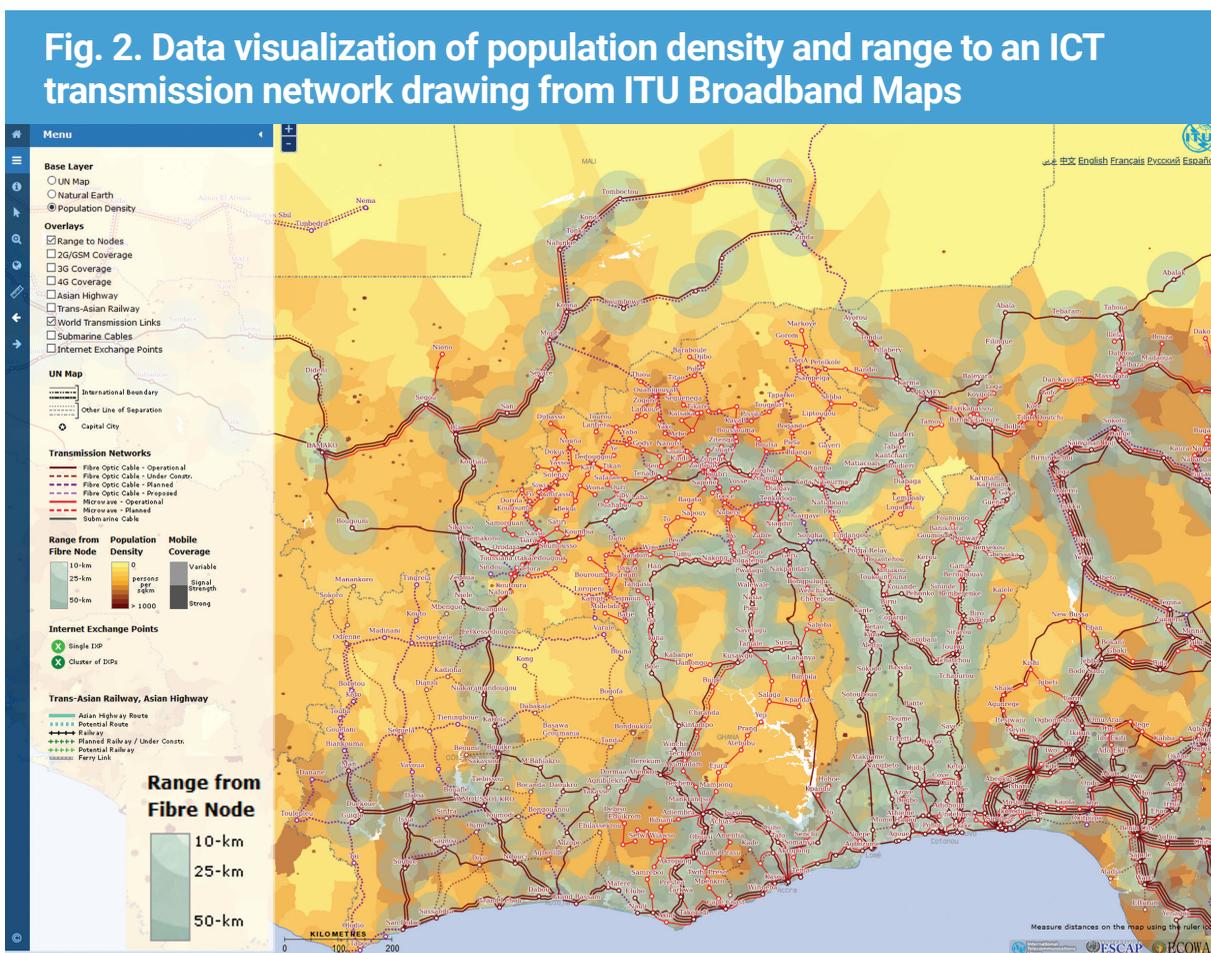
“The COVID-19 crisis has magnified pre-existing inequalities in education and learning, hitting learners in rural areas especially hard”

In the least developed countries, 17% of the rural population has no mobile coverage at all, and 19% of the rural population is only covered by a 2G network. Africa and the Commonwealth of Independent States are the regions facing the biggest gaps, where respectively 23% and 11% of the population have no access to a mobile broadband network (ITU, 2020a). Given the existing disparities, there is an evident risk of increasing inequalities and exclusion of small producers, rural women, older populations and other groups who may lack the opportunities, skills and resources to access the technologies.

Specific attention is therefore needed to bridge the skills gap and digital divide and ensure that digitalization helps to reduce inequalities and marginalization of people experiencing vulnerability (Pearson & UNESCO, 2018a & 2018b).

In rural areas, people are often excluded from the advantages of ICT not only because of inadequate infrastructure, but also because of their low incomes, the lack of affordability of devices and the lack of skills to use the technologies. ICT infrastructure maps are helping to identify gaps and support policy and investment decisions. The identification of rural communities (e.g. location of communities, rural women and girls, rural schools, and data traffic requirements) overlaid against such ICT

and telecommunications data would support the planning of future high-cost and long-term interventions associated with ICT network expansion. As an example, Fig. 2 shows a data visualization of population density and range to an ICT transmission network, from the ITU Broadband Maps project (<https://itu.int/go/Maps>). This map overlays population density against the range from Internet highway access points (optical fibre nodes and other transmission networks). As the distance to access points increases, the challenges in getting reliable and affordable digital connectivity also increase. The identification of rural communities is key in supporting policy and financial decision-making on costly long-term investments associated with ICT network infrastructure.



Data sources: transmission networks: ITU Broadband Maps, <https://itu.int/go/Maps>; range from nodes: ITU Broadband Maps, <https://itu.int/go/Maps>; population density: Global Rural-Urban Mapping Project, Version 1 (GRUMPv1) <https://sedac.ciesin.columbia.edu/data/set/grump-v1-population-density>.

Inequalities in social protection: example of food and nutrition insecurity

SDG target 1.3 calls for countries to “implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable”. Today, more than 70% of the world’s population still has no or limited access to comprehensive social protection, and coverage in rural areas is even lower (FAO & ILO, 2021)³. In rural areas, high levels of informal employment and low rates of civil registration impede access to national social security systems (FAO, 2016b). In addition to bottlenecks in the supply of social protection services or their absence in some contexts, rural populations face various legal, financial, administrative and institutional barriers to accessing social protection, some of them more accentuated for women (ILO & FAO 2021; UNDESA, 2021). Rarely do social assistance and social insurance schemes take into account the bottlenecks and barriers faced by rural populations, especially the more marginalized subpopulations within them.

Measures to ensure food and nutrition security for all are an essential pillar in social protection floors. People working in agriculture often have low and irregular incomes and face high levels of working poverty, malnutrition and poor health, and they suffer from a lack of social protection and support, often forcing them to continue working in unsafe conditions to meet their basic needs (ILO, FAO, IFAD & WHO, 2020). Despite small-scale farming systems contributing over half of the calories produced in the world (Samberg et al., 2016), small-scale farmers, agriculture workers and other rural people are disproportionately represented among the

numbers of the poor and hungry (World Bank, 2018b). Nutritional status and dietary habits are often worse in rural areas (FAO, IFAD, UNICEF, WFP & WHO, 2020). There are stark disparities in the prevalence of minimum dietary diversity by the place of residence (urban/rural) and wealth status. For example, the prevalence of children eating foods from at least five out of eight food groups is on average 1.7 times higher among children living in urban than in rural households, and among those living in the richest households compared to the poorest (FAO, IFAD, UNICEF, WFP & WHO, 2020).

“In rural areas, high levels of informal employment and low rates of civil registration impede access to national social security systems”

The combined effect of COVID-19, corresponding mitigation measures and the accompanying global recession has had serious implications for food and nutrition security (United Nations, 2020d ; IFAD, 2021a). Even before the onset of the COVID-19 pandemic, undernourishment had been rising for several years (FAO, IFAD, UNICEF, WFP & WHO, 2020). The number of undernourished people in the world continued to rise in 2020: between 720 and 811 million people in the world faced hunger in 2020 (FAO, IFAD, UNICEF, WFP & WHO, 2021). Considering the middle of the projected range (768 million), 118 million more people were facing hunger in 2020 than in 2019 – or, if using the upper boundary of the range, as many as 161 million (FAO, IFAD, UNICEF, WFP & WHO, 2021). Addressing food and nutrition insecurity will require inclusive

³ Before the COVID-19 pandemic, only 26.5 per cent of women and 34.3 per cent of men enjoyed comprehensive social protection by law (ILO, 2021d). Although many governments have expanded social protection measures in response to the pandemic, only 13 per cent of measures targeted women’s economic security (UNDP & UN Women 2021).

economic growth with a view to reaching the poor through enhanced employment opportunities and improved incomes – especially for small-scale farmers and other rural workers involved in the production, processing, storage and marketing of food (ILO, 2019d). In the absence of these livelihoods, food security and nutrition measures must be part of integrated social protection floors in rural areas.

Lack of investments in social protection, including through services for food and nutrition security, lays fertile ground for social unrest and terrorism. In contexts with limited rule of law, terrorist organizations provide the opportunity for citizens to channel their grievances against the government; these organizations can also win followers by providing services that the government does not (Bellinger et al, 2021; United Nations & World Bank, 2018).

Inequalities in access to agricultural and market-oriented services

Evidence from around the world shows that when rural people engaged in agriculture have access to agricultural and market-oriented services (advisory, finance, business development, energy access and market support) they are able to increase productivity and profitability, manage risks and diversify into more productive income opportunities to move out of poverty (FAO, 2014; IFAD, 2016a; Veldhuizen et al., 2018). Addressing inequalities in access to agricultural and market-oriented services is therefore a conditioning factor to transforming rural livelihoods and lifting millions out of poverty. Access to productive services and income-generating opportunities often depends on gender, socioeconomic status, ethnicity, asset endowment and proximity to urban centres (Farnworth & Colverson, 2015). For instance, access to public services in agriculture generally increases with farm size, due to policy focus on strategic staple crops (e.g. maize and rice) or on cash crops for export (FAO, 2014;

Ferris et al., 2014). Furthermore, the need for diverse types of services has evolved over the years, with increased exposure to urbanization, market liberalization and, more recently, digitalization. These dynamics call for a wide range of services that empower producers to find adaptive and strategic solutions to shocks and pursue opportunities arising from the changing agricultural market environment. Besides production, market-oriented services place emphasis on markets and the linkages between actors along the value chain for farms to become sustainable businesses and producers to move out of poverty (FAO, 2017a & 2017b).

THE IMPACT OF INTERSECTING INEQUALITIES ON SPECIFIC SUBPOPULATIONS IN RURAL AREAS

Globally about 3.4 billion people live in rural areas, comprising a diverse group of people characterized by intersecting and overlapping social and political identities that often shape the experiences and relationships people have (Cattaneo, Nelson & McMenemy, 2021). Intersections of poverty and exclusionary processes (such as discrimination) are particularly acute for some groups of rural people including, but in no way limited to, rural women and girls, rural youth and children, migrants, older people, indigenous peoples, ethnic minorities and persons with disabilities. Public service delivery in rural areas must be designed in ways that target these intersections in order to ensure social inclusion, fulfil basic human rights and reduce gaps in service coverage.

Rural women and girls

In many contexts, rural women and households headed by women, including widows and abandoned and single mothers, tend to live in extreme poverty. Rural women often have to

cope with excessive workloads, care burdens, time poverty, limited mobility and discrimination, which are compounded by a lack of adequately paid job opportunities in the formal economy. Women play a “triple role” in the productive, care and social spheres (FAO, IFAD & WFP, 2021): they are major players in the agriculture sector, in household food and nutrition security, and in natural resource management. Women work along the value chain – in their own farms and enterprises, in family activities and as employees – and undertake a wide range of productive activities. They engage in a mix of non-farm activities to diversify their livelihood options and are often responsible for the provision of food for their families. Social norms also prescribe women to doing the majority of domestic work and unpaid care for children, older people and sick members of households (FAO, IFAD & WFP, 2021). Moreover, the pandemic has seen an increase in women’s unpaid care work, with children out-of-school, heightened care needs of older persons, overwhelmed health services and disrupted food systems (UN Women & United Nations, 2020; UN Women, 2021).

“Rural women often have to cope with excessive workloads, care burdens, time poverty, limited mobility and discrimination”

Poor rural women tend to experience multiple forms of discrimination and marginalization in terms of access to public services (FAO, IFAD & WFP, 2021). Rural women may face: barriers to education and training; lack of control over critical resources (e.g. property, land, financial services, technologies); barriers to access to income, decent work opportunities and social protection benefits; barriers to health services; exposure to domestic violence; excessive workloads, as they are called upon to carry out

both reproductive and productive activities; and very limited participation in decision-making or opportunities to provide leadership at different institutional levels (UNDP, 2021). There is a lack of adequate public support for unpaid care work, such as childcare and long-term care for older persons or persons with disabilities, of which women do the overwhelming majority, in many rural areas, particularly in low-income countries. Adolescent girls and older women may experience particular vulnerabilities in rural areas. In some contexts, adolescent girls may face forced early marriage, lack of decision-making on health, and limited access to health services (FAO, IFAD & WFP, 2021). In the absence of adequate social pensions, older rural women often have no independent income, no control over fixed assets such as land that could act as collateral, and limited exposure to business or the formal employment sector. In many parts of the world, older widows are socially ostracized or discriminated against; for instance, they are denied the right to inherit the property they shared with their husbands (WHO, 2021d).

Rural youth and children

Rural youth face disadvantages in accessing productive and gainful jobs due to their limited access to productive resources, including land and credit, and to markets and organizations. Young people in rural areas may also experience ageism (WHO, 2021d). Their access to quality education, vocational education and training is often limited by financial barriers (e.g. training and transportation costs) and non-financial barriers (e.g. scarce education and training infrastructures, inflexible teaching/training schedules, etc.), calling for a rethink of policies and practices to enhance learning for young people in rural areas (Robinson-Pant, 2016). Rural youth mostly work in the informal economy and are likely to have vulnerable jobs (IFAD, 2019a). Thus, rural youth generally suffer from a lack of critical assets and are exposed

to the risks and insecurity of extremely poor living and working conditions. It is also worth noting that young people from specific rural minorities and subpopulations experiencing exclusion (such as indigenous youth, youth with disabilities, young migrants, young refugees, girls and rural young workers aged 15–17 years) may face additional vulnerabilities, challenges and possibly marginalization owing to their specific difficulties in accessing training, resources and employment. Young women in rural areas are often in a more disadvantaged position than young men. They are more exposed than their male counterparts to gender-specific disadvantages in the labour market, including gender-based violence, lower wages and labour exploitation, as well as having lower access to productive resources (IFAD, 2019a).

“Children in rural disadvantaged communities are at much greater risk of child labour, child marriage and child trafficking due to limited access to education, lack of incentives and lack of childcare facilities”

In the COVID-19 context, interruptions in education and vocational services can have long-term consequences for the affected young cohorts and are likely to further increase inequality for rural children and youth. According to a harmonized dataset from high-frequency surveys in 34 countries, accounting for a combined population of almost 1.4 billion, school attendance was particularly affected in rural areas where children were 6.3 percentage points less likely than urban children to continue learning after schools were closed (Bundervoet, Dávalos & Garcia, 2021).

Children in rural disadvantaged communities are at much greater risk of child labour, child marriage and child trafficking due to limited access to education, lack of incentives to keep children in school (e.g. school meals, starter kits, vocational training) and lack of childcare facilities. In the context of COVID-19, the global gains in reducing child labour are likely to be reversed for the first time in 20 years (ILO, 2020d). Much agricultural work, particularly heavy manual labour and work with machines and pesticides, can be hazardous to health and children should not be engaged in it. Child labour is a serious violation of human rights, and yet many families worldwide draw their children out of school into work as a negative coping strategy (ILO, 1999). Child labour endangers the health and education of children and represents an obstacle to sustainable agricultural development and food security. Child labourers are very likely to remain poor, perpetuating the cycle of poverty, child labour and hunger, and in turn, hindering agricultural and rural development.

Indigenous peoples

There are approximately 476 million indigenous peoples worldwide, in over 90 countries (ILO, 2019e). Indigenous peoples are disproportionately represented among the numbers of people living in extreme poverty (ILO, 2019e). Most indigenous and tribal peoples around the globe live in rural areas, and remain highly marginalized and discriminated (IFAD, 2021b). Indigenous peoples are affected by persistent inequalities in access to basic education, health and social services, markets and other services (IWGIA & ILO, 2020; United Nations, 2020e).

As indigenous peoples are often concentrated spatially, the local geography and lower coverage of culturally appropriate services in rural and remote areas are key factors in

shaping well-being outcomes. An analysis by the Organisation for Economic Co-operation and Development (OECD) shows that gaps in well-being between indigenous and non-indigenous peoples are typically larger in rural areas: for example, the gap in the employment rate is 8.6 percentage points in urban regions, while it is more than double – 18.4 percentage points – in rural regions (OECD, 2019). Indigenous peoples' food security and livelihoods often depend on access to local ecosystems, which are under pressure due to precarious land entitlements and being further challenged by the new demands of a growing population or by business encroachments on natural resources (IFAD, 2021b). Indigenous peoples often experience worse health outcomes across a range of health indicators, with significant gaps in life expectancy seen in countries that have disaggregated data available (UNDESA, 2018). Also, available evidence shows that the epidemiological profile of these groups reflects persistently high incidence of and mortality rates from infectious diseases such as tuberculosis and NCDs such as diabetes (PAHO, 2019). These poor outcomes can be driven by barriers to health services, adverse health determinants and the lack of provision of intercultural care that values traditional health practices such as indigenous midwifery.

“The disruption of cultural and economic activities, as well as some health services, due to the COVID-19 pandemic has exacerbated challenges being faced by indigenous peoples around the world”

Across the SDGs, inequalities experienced by indigenous peoples can be largely attributed to historical injustices that have resulted in extreme poverty and exclusion. The disruption of cultural and economic activities, as well as some health services, due to the COVID-19 pandemic has exacerbated challenges being faced by indigenous peoples around the world (IWGIA & ILO, 2020).

Other populations experiencing discrimination based on ethnicity

Racial and ethnicity-based discrimination and inter-ethnic tensions – across sectoral domains – undermines human rights and contributes to/exacerbates inequalities and poverty in rural areas. This is particularly the case in contexts where state capacity to enforce anti-discrimination legislation and ensure redress is weak, which can be more prevalent in rural and remote areas. Discrimination can happen against ethnic minorities in rural areas, as well as against ethnic majorities in rural areas by minorities of other ethnicities. Discrimination can also be direct or systemic/structural, with the latter often being heavily determined by historical factors.

Globally, Afro-descendants are at particular risk of experiencing discrimination. About one in four Latin Americans self-identify as Afro-descendant (Freire et al., 2018) and they are overrepresented among the poorest populations in the region (Morrison, n.d.). Additionally, rural Afro-descendant households are more severely affected by poverty than urban ones; indeed, in rural areas they are more likely to be poor compared to households with similar characteristics but headed by someone of a different racial identity (Freire et al., 2018). Box 4 elucidates how intersecting inequalities in coverage with public services exacerbate poverty for the Quilombola people in Brazil.

Box 4. Inequalities in coverage of public services among Quilombo communities in Brazil

Brazil is home to the highest number of Afro-descendants in the Region of the Americas. During slavery, Quilombo settlements represented areas of resistance and freedom for Afro-descendants; they served as places of refuge, where traditional culture and religion could be practiced. There are over 3000 Quilombo communities in Brazil today and many of the current rural Afro-descendant communities in Brazil still reside in Quilombos. In 1988, the Constitution of Brazil granted land rights to the descendants of these first Quilombo habitants. Despite this change in the Constitution, and due to persistent racism, structural discrimination and legal barriers, the vast majority of Quilombo communities still do not have land rights. Denial of land rights for Quilombo communities exacerbates poverty, increases inequalities and is in violation of ILO's Indigenous and Tribal Peoples Convention, 1989 (No. 169). In 2018, the Brazilian Supreme Court⁴ recognized legal mechanisms for accessing land rights for these communities. Despite some advances in the last decade, many Quilombo communities in Brazil still lack basic services and commodities such as running water, electricity and access to safe and reliable roads. Quilombo communities also face barriers in accessing education, health and social protection services.

Sources: Branford & Torress, 2017; CERD, 2011; Freire et al., 2018; ILO, 2019; Inter-American Commission on Human Rights, 2021; Lusby & Thais, 2019; Sax & Angelo, 2020; Takeuchi & Mariotti, 2016; United Nations Human Rights Council, 2014.

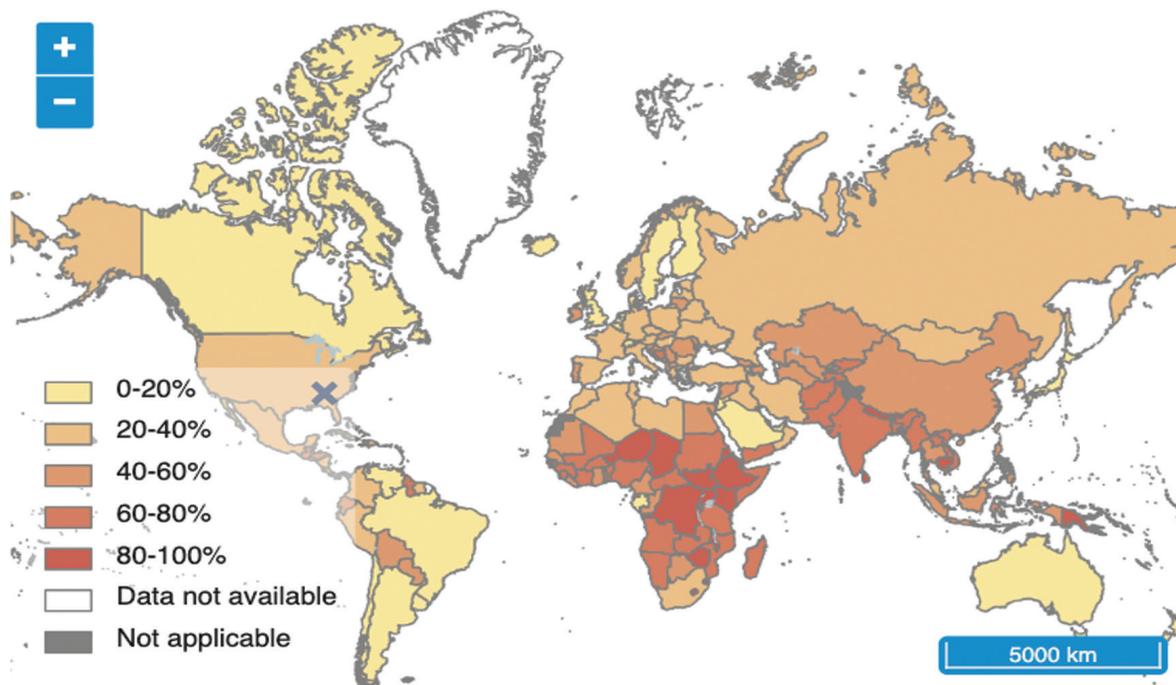
Older people

In many countries, rural and remote areas experience higher levels of population ageing than urban areas and, subsequently, have a higher proportion of older residents (OECD, 2020b). The percentage of older people living in rural areas tends to be highest in low- and lower middle-income countries where access to health and social care tends to be most limited, as shown in Fig. 3 (WHO, 2021e). Data demonstrate a universal trend across regions, from sub-Saharan Africa and Asia to Latin America and the Caribbean: the proportion of older people living in rural areas has increased and the proportion of younger people has declined (HelpAge International, 2014).

Migration of young people to areas of perceived greater economic opportunity often results in older family members being left behind in rural areas without traditional social support structures (WHO, 2015a). Older people also face additional challenges and exclusion owing to ageist policies, laws and practices that limit their opportunities for continued employment, training and social participation, as well as their access to resources and services (WHO, 2021d). Underlying lower education levels of rural older populations, compounded by lower access to lifelong learning opportunities, can also pose additional barriers in navigating the administrative aspects of service coverage, across sectoral domains. As agriculture continues to be

⁴ ADI 3229/2018/STF, Procedure for identification, recognition, delimitation, demarcation and titling of lands occupied by remnants of quilombo communities: <https://redir.stf.jus.br/paginadorpub/paginador.jsp?docTP=TP&docID=749028916>.

Fig. 3. Percentage of older people (aged 60 or over) living in rural areas



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

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Source: WHO, 2021e.

the most important source of employment for older people in low- and middle-income countries, there is a particular need for relevant services to account for the circumstances and potential of older farmers. Likewise, occupational health and safety measures for older farmers must be strengthened.

There is an urban-rural difference in older people's health in many countries, with rural older adults suffering poorer health than those living in urban areas, linked to adverse social determinants and weaker health systems in rural areas. Rural-urban inequities are also found in older adults' access to social protection schemes, as well as the quality and coverage of those schemes (ILO, 2015; UNECE, 2015). Geographical distances and less developed transport services in rural

areas pose additional challenges to accessing health and social care. Older populations may require these services more frequently and may face additional barriers in accessing them if they start to suffer from a loss in mobility or cognitive function (WHO, 2015a). Particular attention should also be given to whether or not pensions are sufficient on their own to guarantee decent living conditions that do not force older adults to stay in the labour market to supplement them, or to otherwise live in poverty.

In the context of COVID-19, older populations in rural areas are particularly at risk for the health dimensions of the crisis: the higher risks of experiencing severe disease manifestations due to age and comorbidities that are exacerbated by lower access to quality services in rural

areas (Henning-Smith, 2020; Rivera-Hernandez, Ferdows & Kumar, 2020). Social support mechanisms have also been affected by the pandemic, impacting the support that care-dependent older adults living in rural areas are receiving (Ekoh et al., 2020).

Persons with disabilities

According to the United Nations *Disability and development report 2018*, persons with disabilities in rural areas tend to be at a disadvantage (United Nations, 2019a). Persons with disabilities in rural areas experience higher poverty rates due to barriers, such as discrimination, and limited access to education, decent employment and a range of services that promote their well-being and inclusion. While data are available from only a limited number of countries, they indicate that:

- compared to persons with and without disabilities from urban areas and to persons without disabilities in rural areas, persons with disabilities in rural areas are the least likely to have attended school and the least likely to be employed (United Nations, 2019a);
- persons with disabilities from rural areas are less likely than those from urban areas to live in a household with access to a mobile phone (United Nations, 2019a);
- mothers with disabilities in rural areas are less likely than those in urban areas to have a skilled birth attendant during delivery (United Nations, 2019a);

- persons with disabilities living in rural areas face added barriers in accessing a range of specialized health services (as described in this brief, in the subsection on health).

While analysis of the incidence, distribution and trends in disability is limited by a lack of high-quality data, the available studies indicate that there is a positive correlation between poverty and disability, at both the individual and the household level, and that disability is generally associated with multidimensional poverty.⁵ This self-reinforcing dynamic is likely to be even more marked for rural families of persons with disabilities in developing countries, where health and social service coverage is often limited.

Internal and international migrants

Rural poverty and disinvestment have been a driving force of mass migration and urbanization. In many rural areas, local relationships and networks are also fragmented due to out-migration. While migration can bring benefits (e.g., through remittances), it can also radically transform rural communities through loss of workers in their productive years, with older persons and children being left behind (OECD, 2006, 2010 & 2016). Public services in rural areas have a role in both serving to break transgenerational poverty and enhance social mobility, as well as in providing local employment opportunities to offer alternatives to out-migration.

In the COVID-19 context, multiple countries are seeing increased urban-to-rural migration, in

5 Hanass-Hancock J, Mitra S (2016). Livelihoods and disability: the complexities of work in the Global South. In: Grech S, Soldatic K, editors. *Disability in the Global South: the critical handbook*, pp 133–49. Hanass-Hancock & Mitra offer a global perspective, corroborated by in-depth country studies by: Parodi G, Sciulli D (2008), *Disability in Italian households: income, poverty and labour market participation*, *Applied Economics*, 40(20):2615–30 for Italy; She P, Livermore GA (2007), *Material hardship, poverty, and disability among working-age adults*, *Social Science Quarterly*, 88(4):970–89 for the United States of America; and Mont D, Cuon NV (2011), *Disability and poverty in Vietnam*, *World Bank Economic Review*, 25(2):323–59 for Viet Nam.

particular by persons employed in the informal economy in cities who upon losing their jobs are returning to their rural communities of origin. In India, for example, millions of internal migrant workers returned to their rural hometowns during the March 2020 lockdown (Mitra, 2020). Informal workers migrating back to their villages drive further impoverishment and hunger in rural areas, while also potentially overwhelming weaker rural health systems (Parisotto & Elsheikhi, 2020). In China, some migrant workers, unable to return to their former workplaces in urban centres, are seeking job opportunities closer to their home villages (Feng & Cheng, 2020). The International Labour Organization (ILO) reports that, following years of indigenous women and men migrating from rural to urban centres in search of livelihoods, COVID-19 has left many unemployed and they have started migrating back to their former rural communities seeking physical and economic security (ILO, 2020e).

In addition to internal migration, it is estimated that nearly 12 million international migrant workers are engaged in agriculture globally, representing 7.1% of international migrant workers (ILO, 2021c). The presence of international migrants in the agriculture sector cannot be underestimated; it benefits both the countries of destination and the countries of origin, and is essential for the functioning of many agricultural systems (ILO, 2018b). The inequality experienced by many international migrants in rural areas became evident during the COVID-19 pandemic (ILO, 2020f & 2020g). Many international migrant workers are in irregular situations that preclude access to public services, and they experience other decent work deficits, often being responsible for tasks which local people are not willing to undertake (ILO, 2020f; Martin, 2016). In some countries, migrant workers, including those in agriculture, are not covered by national labour legislation (ILO, 2019f).

Border closures and travel restrictions have created new vulnerabilities for migrants, refugees, internally displaced persons, and mobile populations in transit, many of whom found themselves stranded and unable to return to their places of origin, or continue to their destination. In many cases, mobility-related policies and lockdown measures taken to reduce the transmission of the virus have created significant additional challenges, including the loss of income, livelihood opportunities, and remittances; the risk of becoming stranded; decreased access to essential services; increased risk of exposure to gender-based violence (GBV); and a reduced ability to seek refuge, among others (IOM, 2020). Exploitation by human smugglers and human trafficking has increased during the pandemic, as cross-border movements have been limited (IOM, 2020). Migrants are often excluded from national COVID-19 policy responses such as wage subsidies, unemployment benefits, or social security and social protection measures, including health care in countries of destination (ILO, 2020g). Upon return to their countries of origin, many faced challenges of unemployment and the loss of financial stability that their remittances sent home from abroad had provided.

The return of migrants to rural areas from urban centres and abroad poses new challenges for rural public service provision, given the increase in the numbers of people needing services in addition to the lower levels of remittances coming into rural communities (IFAD, 2020b). While there is emerging evidence that remittance flows have not been as adversely impacted as predicted earlier in the pandemic (KNOMAD, 2021), those sent by migrants who have lost employment are impacted. Remittances directly affect the lives and livelihoods of 1 billion people: 200 million migrants who send money to their 800 million relatives. Almost half of these relatives live in rural areas, where levels of poverty and hunger are highest (IFAD, 2020a).

Part II: Entry points for increased awareness and action

Adequate access to public services by rural populations is a conditioning factor to transforming rural livelihoods, reducing urban-rural inequalities and lifting millions out of poverty. In the context of building forward better, rural services are catalysts for inclusive rural transformation. Improvements in access to services and infrastructure in rural areas lead to the expansion of economic diversification, including remunerative off-farm jobs and enterprises. Public services create new livelihood opportunities in rural areas through better health, education and skills development, opening new horizons for both farm and off-farm employment. Access to education, health care, social housing, childcare and care for older family members increases household disposable cash income by as much as 29% on average in OECD countries (Verbist, Förster & Vaalavuo, 2013).

This section explores selected key areas for investment in the process of strengthening rural public service provision. Specifically, it describes the role of:

- transformative rural development planning;
- “rural proofing” as part of transformative rural development planning;
- data systems that elucidate who is being left behind;
- adequate human resources for public sector services in rural areas;
- service delivery frontiers: capitalizing on technological, organizational and social innovations;

- public sector financing and budgetary management practices;
- raising awareness of the security dangers of inequalities, disinvestment and weak state presence in rural areas;
- strengthening rural institutions, networks and organizations for pluralistic service delivery;
- community engagement and social accountability;
- investing in services that foster intergenerational inclusion;
- addressing internal cyclical migration and the rural-urban continuum in service provision;
- investing in intermediary cities;
- investing in services that safeguard and strengthen natural capital.

TRANSFORMATIVE RURAL DEVELOPMENT PLANNING TO ADDRESS INEQUALITIES

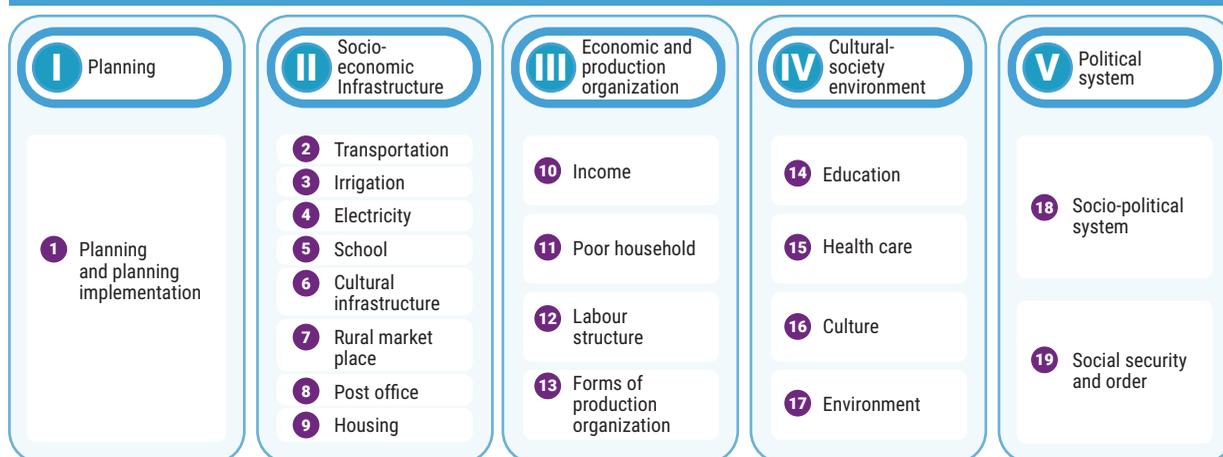
Strengthening service coverage for rural populations, particularly for the rural poor, will require a holistic, multisectoral and transformative view of rural development planning. Such a view would enable the achievement of multiple SDGs simultaneously (United Nations, 2021). Historically, the concept of integrated rural development emphasizes the need for a comprehensive multisectoral approach with a focus on involvement of the less privileged strata through an appropriate design of development programmes (Leupolt,

2008). Integrated rural development has evolved over time, having been criticized for: being too complex and difficult to design and administer; overestimating state capacity to coordinate; and being marked by projects that became centralized, bureaucratic and unable to coordinate actors on the ground (Baah-Dwomoh, 2016). It has also failed to take into account the role of the emerging private sector and undermined cooperative producer organizations. With these lessons and as documented in the IFAD 2016 rural development report, there is a new aspiration for people-centred approaches to rural transformation with better access to services and infrastructure, rising agricultural productivity, increasing marketable surpluses, expanded off-farm employment opportunities, and greater capacity to influence policy for improved rural livelihoods and inclusive growth (IFAD, 2016a).

The tenets of this transformative approach are also reflected in the work of OECD (2016) regarding a new rural development paradigm

for developing countries. OECD’s work highlights the critical role of eight components for effective rural development planning: governance; engagement of multiple sectors; infrastructure; strengthening urban-rural linkages; inclusivity; gender equality; attention to demographic dynamics; and sustainability. The application of these priority components by the Republic of Korea in their implementation of the “Saemaul Undung” initiative⁶ resulted in considerable rural development gains across sectors, with the experience underlining the critical nature of strong governance across all sectors and stakeholders (ADB, 2012; OECD, 2016). Figure 4 shows how Viet Nam’s National Targeted Programme on New Rural Development⁷ also applies these principles, including through its 19 minimum criteria for each village (IFAD, 2016b; OECD, 2016). These criteria are adapted by local governments and communities to their actual needs, after which they set in motion a process to meet the targets necessary to qualify for certification under the “new rural” standards.

Fig. 4. Viet Nam’s National Targeted Programme on New Rural Development: 19 minimum criteria for each village



Source: OECD, 2016, drawing from Vu Thu, Do Thu & Nguyen, 2014.

Note. Criteria used during 2016-2020; criteria for use during 2021-2025 still being confirmed.

6 Saemaul Undung, often referred to as the New Village Movement, was a rural community development initiative during the 1970s in the Republic of Korea (ADB, 2012; OECD, 2016).

7 Launched in 2010, the National Targeted Programme on New Rural Development is the Government of Viet Nam’s primary instrument for implementing its rural development strategy (IFAD, 2016b; OECD, 2016).

As demonstrated by these examples, promoting responsive, effective, equitable and inclusive service provision requires strong governance, a system perspective and a set of integrated interventions that empower authorities, rural people and institutions to engage in collective action and find solutions to common challenges. This implies systemic interventions (such as “rural proofing”, described in the following subsection) that recognize the heterogeneity of rural populations and the underlying socioeconomic relations in rural areas, as well as the plurality of service providers and actors involved from public agencies, the private sector and rural/producer organizations. It involves identifying the diverse needs of service users, assessing what services are available, who provides them, and which combination of services is the most effective in reaching different subpopulations who experience intersecting inequalities in rural settings. This necessitates data collection and analysis, generating evidence, creating knowledge, developing capacities and facilitating national, regional and global dialogues on ways to improve rural services in order to better inform the policy-making process.

Integrated territorial (and rural and urban) planning supports the spatial integration

“Rural proofing describes the systematic application of a rural lens across policies to ensure that they are adequately accounting for the needs, contexts and opportunities of rural areas”

of different sectors. It formulates realistic scenarios for investments, enabling a more effective deployment of resources and reducing exclusion. In such efforts, the complementary roles and development dynamics across the rural, peri-urban and urban spaces should be considered, overcoming the dichotomy of rural and urban development and establishing a wider territorial perspective on local development that takes into account the flows of people, goods and services over time, as well as the importance of systems of human settlements for anchoring service delivery at the local scale.

“RURAL PROOFING” AS PART OF TRANSFORMATIVE RURAL DEVELOPMENT

Rural proofing is a term used to describe the systematic application (involving ex-ante and ex-post evaluations) of a rural lens across policies to ensure that they are adequately accounting for the needs, contexts and opportunities of rural areas (OECD, 2020b; Rural England CIC, 2020). Rural proofing can be an important tool in strengthening the capacity of the public sector to deliver services to rural communities. The term “equity-oriented rural proofing” looks not only at how the policies account for urban-rural differentials, but also at inequalities between different subpopulations within rural areas (e.g. by sex and gender, age, disability, ethnicity, income, geographical location, migration status, occupation, etc.). Box 5 presents general principles for rural proofing, as described by the South African Rural Health Advocacy Project (2015).

Box 5. General principles for rural proofing

The guidelines for rural proofing for health of the South African Rural Health Advocacy Project set out the following principles:

- rural proofing is a systematic approach to accounting for rural factors in policy and strategic planning processes;
- rural proofing is a process of mainstreaming rural into policy as well as developing targeted rural policy;
- there is a statutory body – government department or committee – that oversees rural-proofing and coordinates activities between line departments;
- there is often legislation that makes rural-proofing mandatory and guides its implementation;
- there are toolkits and guidelines that assist policy-makers with the implementation of rural-proofing;
- rural proofing includes review of budgets to ensure that policy changes that affect rural areas and communities are funded;
- there are a set of clear indicators that are used to monitor progress in implementation.

Source: Rural Health Advocacy Project, 2015.

OECD's *Rural well-being* policy framework (2020) calls for greater application of rural proofing, while also identifying that lack of coordination and integration across sectoral policies undergoing rural proofing can lead to missed opportunities on investment and policy complementarities (OECD, 2020b). These factors point to the importance of rural proofing being done in the context of transformative multisectoral rural development policy, where complementarity between sectoral investments is prioritized. Coordination mechanisms such as specialized high-level units, integrated ministries, inter-ministerial working groups and formal contracts can support integration (OECD, 2006). Local level coordination mechanisms must be strengthened to support rural proofing, not only across sectors but also to achieve appropriate geographic scale for optimal service delivery, including through the use of inter-municipal cooperation

authorities (OECD, 2006). Due attention must be given to the mandate of different levels of government in relation to sectoral policies and their coordination on the regional and local government level.

DATA SYSTEMS THAT ELUCIDATE WHO IS BEING LEFT BEHIND

Multisectoral transformative rural development planning needs to build on territorial data and knowledge (disaggregated and georeferenced) covering urban, peri-urban and rural areas, and addressing populations, services, infrastructure and economic activities, as well as environmental systems and flow of people and goods. Nonstate and grassroots knowledge should also be included, and data made accessible, transparent, interactive and available for all (UN-Habitat, 2019).

Investments in service provision can leverage the benefits of new tools such as geospatial data (including from the most recent population census) and computational means for data collection, analysis and visualization. These provide a spatial dimension when analysing weaknesses, strengths, gaps and opportunities in access to services, by emphasizing the interconnection between spaces, places and actors (Cattaneo, Nelson & McMenomy, 2021; OECD/EC-JRC, 2021).

They also support decision-making, as visualization and demonstration of scenarios can be used to enhance participation and engagement of local stakeholders. Box 6 provides an example of such data. These tools further contribute to reporting on progress towards the SDGs, in line with the growing call

for geospatial and location-based information to be better recognized and accepted as official data for the SDGs. An effort to generalize the use of spatial data in development planning in rural, peri-urban and urban contexts would greatly contribute to defining the strategies of service delivery and optimizing investments across sectors and across rural and urban spaces.

“Investments in service provision can leverage the benefits of new tools such as geospatial data and computational means for data collection, analysis and visualization”

Box 6. Estimates and interactive visualizations for evidence-based decision-making to improve public services in rural areas

In many rural areas, economies of scale can be difficult to achieve; the physical infrastructure needed to provide quality services, including broadband networks, can be more complex and expensive, and attracting highly skilled people is difficult. Furthermore, rural regions that are losing population may have disproportionate concentrations of older persons, potentially resulting in higher demand for social and health care services. To respond to these challenges, policy-makers need better territorial statistics on quality, cost and access of services in order to pursue evidence-based policies, especially in the post-COVID-19 period. Such information, which can be compiled in the form of present and future estimates, can support the application of a spatial lens in developing policies and in adapting the provision of services to different territorial realities by explicitly showing the trade-offs involved in balancing cost-efficiency and access. An example of how this has been done is the 2021 OECD and European Commission Joint Research Centre (JRC) report [Access and cost of education and health services: preparing regions for demographic change](#), which provides internationally comparable, fine-grained present and future estimates of the cost and physical access to education (primary and secondary) and health services (cardiology, maternity and obstetrics) for 27 countries in the European Union and the United Kingdom of Great Britain and Northern Ireland. An [interactive platform](#) for visualizing maps and graphs and for downloading geospatial data on education and health services for municipalities, regions and countries complements the report.

Source: OECD/EC-JRC, 2021.

One of the constraints to transformative rural development is the lack of comprehensive data on service coverage disaggregated by relevant geographical units and rural/urban as well as sex/gender, age⁸, disability, income, education, ethnicity, occupation, etc.⁹ Poor data on service coverage limit governments' capacity to develop policy and regulatory frameworks and implement programmes to redress inequalities and service gaps. In cases where datasets are strong and can be disaggregated, there may be an underuse of inequality data. For instance, survey data from Demographic and Health Surveys and Multiple Indicator Cluster Surveys can be disaggregated by a range of equity stratifiers, but authorities responsible for service provision may decide to do so only partially and haphazardly; the result is that data on inequalities are not systematically integrated into planning, monitoring and evaluation cycles, hence undermining their capacity to inform equity-oriented decision-making. Inequalities can be assessed using disaggregated data and summary measures that are visualized in a variety of interactive graphs, maps and tables, enhancing their interpretability/accessibility for use in decision-making. A range of tools exist to support inequality assessments across sectoral domains; for example, the Health Equity Assessment Toolkit (HEAT) and Equitable Impact Sensitive Tool (EQUIST)¹⁰ are two tools that support the use of disaggregated data by health sector decision-makers.

Civil registration and vital statistics (CRVS) services can be weaker in rural areas and among poorer households when compared to urban areas and more affluent households, respectively. In a study by Bhatia et al. (2017),

significant wealth-related inequalities in birth certificate coverage were observed in 74 countries and urban/rural inequalities were observed in 60 countries. The coverage was systematically lower among children living in households belonging to the poorest wealth quintile compared to the highest quintile, and rural children were consistently more disadvantaged when compared to urban children (Bhatia et al., 2017). Weak CRVS systems, particularly in Africa and South Asia, mean that rural and poor children are likely to be unregistered and thus excluded from benefits tied to a birth certificate and prevented from accessing social protections, social transfers and government schemes that focus on the poor (AbouZahr et al., 2015; Bhatia et al., 2017).

“Poor data on service coverage limit governments’ capacity to develop policy and regulatory frameworks and implement programmes to redress inequalities and service gaps”

Low registration coverage is influenced by multiple factors. Although registration is free in many countries, costs can still be incurred for obtaining parental identity documents, fines for late registration, transportation expenses and bribes (AbouZahr et al., 2015; Bhatia et al., 2017; World Bank & WHO, 2014). Other reasons for low coverage include: registration processes which discriminate based on ethnicity; religion, statelessness, migratory or refugee status or single parent status;

8 In the past, data collection often excluded older people or data were aggregated for people over a certain age, such as 60 or 65 years. To improve social inclusion of older people in accordance with their range of needs, 5-year age brackets should be considered when possible (WHO, 2020).

9 Other variables such as membership in producer organizations, farm size or landholding may be considered based on the context of the analysis

10 HEAT: https://www.who.int/data/gho/health-equity/assessment_toolkit; EQUIST: <https://www.equist.info/>

lack of awareness about registration and its benefits; poor-quality registration data; and inaccessibility of registration facilities due to physical, economic or socio-cultural barriers (AbouZahr et al., 2015; Bhatia et al., 2017; World Bank & WHO, 2014). Strengthening of registration and CRVS systems should be prioritized in order to monitor and address health inequalities within and between countries (Bhatia et al., 2017). It is important to review the CRVS system regularly, identify gaps, strengthen governance and linkages between key stakeholders (to support supply and demand), and ensure social participation (Garenne et al., 2016; MEASURE Evaluation, 2015; Suthar et al., 2019).

Data and analyses often overlook the plurality of service providers (from public, private and civil society) or service delivery (type of service, coverage, funding sources) (FAO, 2017c). In agriculture, for instance, reference is often made to public extension service and the ratio of farmers to extension agents is generally used as an indicator. Thus, the available information does not enable nuanced understanding of who is left without the service they need and why (FAO, 2017c). When data include public services alone, the analysis on the effectiveness of a service on reducing rural poverty may be misleading, as households that received services from non-traditional service providers and saw an increase in income would still appear as a household that did not have access to the service. Thus, collection of disaggregated data that capture the heterogeneity of service users and that recognize the plurality of services and actors involved in service provision could fill this gap and provide evidence for inclusive policies and targeted investments (FAO, 2017c). These data could also support governments in their quality oversight/regulatory role with non-traditional service providers.

For some services, collecting data on unmet needs is also relevant. For example, in the measurement of progress towards universal health coverage, there are service coverage and financial protection dimensions. Financial protection indicators capture financial hardship arising from the use of services. However, they do not indicate whether out-of-pocket payments for those services created a barrier to access and resulted in people forgoing service usage. For that reason, it is salient to ensure that unmet need is part of the analysis (WHO Regional Office for Europe, 2020). This can shine light on situations where services are not easily affordable, particularly for poorer rural households. Measuring unmet need and the self-reported reasons for it can also illuminate other barriers to services, such as lack of transportation, opportunity costs, gender-related barriers (e.g. the need to seek permission) and other factors (Houghton, Bascolo & Del Riego, 2020; WHO, 2019).

“Strengthening of registration and CRVS systems should be prioritized in order to monitor and address health inequalities within and between countries”

Social registries for identifying poor households nationwide present an opportunity for increasing access to services. In Cambodia in 2005, the Ministry of Planning introduced the “Identification of Poor Households” (IDPoor) mechanism. This standardized identification mechanism serves to identify poor and vulnerable households by combining proxy means tests¹¹ with community-based targeting (BMZ, 2017). Those households that are

11 IDPoor looks at quantifiable or observable “proxies” (assets such as the ownership of a television) or behaviours (such as school attendance).

identified as poor¹² receive an equity card, and they can access a range of free health and social programmes across sectors provided by the Government and nongovernmental organizations. Between 2015 and 2017, IDPoor reached over 550 000 poor households living in rural areas, and in 2019 the programme expanded to include urban dwellers (GIZ, 2019). Amid COVID-19, the Royal Government of Cambodia initiated and launched a cash transfer programme for poor and vulnerable households in June 2020. Due to the existing IDPoor database and mechanism, the Government was able to quickly implement this important initiative. Within a year (25 June 2020–24 June 2021) the programme had supported 652 484 poor and vulnerable households (2.58 million people), with a total cash transfer amount of US\$ 351.77 million – the largest cash transfer programme in Cambodia’s history. However, exclusion errors from Cambodia’s poverty identification method can still be significant as the data become obsolete. To mitigate exclusion errors, the Government has also rolled out the so-called “on-demand” IDPoor mechanism in order to register new households. Also, the country does not yet include a comprehensive repository on pluralistic service provision for data analysis to provide a full picture of inequalities in access to services.

“While the tenets for development, attraction, recruitment and retention will differ across some sectors, key recommendations for the health workforce offer insights to the types of issues that must be addressed”

ADEQUATE HUMAN RESOURCES FOR PUBLIC SECTOR SERVICES IN RURAL AREAS

Ensuring adequate numbers of appropriately trained professionals in rural areas is central to reducing inequalities in service coverage. While the tenets for development, attraction, recruitment and retention will differ across some sectors, key recommendations for the health workforce offer insights to the types of issues that must be addressed (see Box 7). Like investment in other service domains in rural areas, investment in the health workforce not only contributes to equitable access to quality health services by the rural poor, but can create much needed jobs in a broad range of other sectors such as administration, cleaning, information technology, transportation, agriculture, food, wholesale, research and retail (ILO, 2019g). Community health workers, who in most countries are mostly women and often work for little or no pay, can play an important role in primary healthcare provision in rural areas if they are properly trained, adequately remunerated and provided with adequate supplies (WHO, 2018c). ILO estimates suggest that each investment in the creation of one job in the health sector has the potential to generate 2.3 jobs for workers in non-health occupations (with variations between regions) (Scheil-Adlung, 2016).

When a social accountability approach is taken, the health sector can be a leading source of current and future employment notably for rural women and youth (WHO, 2017a). Due attention is required to optimize the working conditions of rural public sector professionals: to empower them, ensure decent work and protect their labour rights and representation.

12 Community members are involved in the identification of poor households.

Box 7. Health workforce development, attraction, recruitment and retention in rural and remote areas

The 2021 updated WHO guideline on *health workforce development, attraction, recruitment and retention in rural and remote areas* highlights the importance of interconnected, bundled and whole-of-society approaches to rural service delivery, tailored to the local context.

Education recommendations include measures such as targeted admission policies to enrol students with a rural background in health worker education programmes; locating health education facilities and training programmes closer to rural areas; exposing students of a wide array of health worker disciplines to rural and remote communities and rural clinical practices; aligning health worker education with rural health needs; and facilitating continuing education of rural and remote health workers.

Regulatory recommendations include introducing and regulating enhanced scopes of practice in rural and remote areas for health workers to better meet the needs of the communities; expanding health worker occupations to meet rural health needs; ensuring that compulsory service agreements respect the rights of health workers and are accompanied by appropriate support and incentives; and tying education subsidies for health workers to agreements for return of service in rural areas and remote areas.

Incentive packages involve a combination of fiscally sustainable financial and non-financial incentives to influence health workers' decisions to relocate to or remain in remote or rural areas.

Personal and professional support involves investing in rural infrastructures and services to ensure decent living and working conditions for health workers and their families; ensuring a secure and safe working environment, including prevention of violence against health workers and appropriate occupational health and safety and infection prevention control measures; providing decent work that respects the fundamental rights of health workers; fostering the creation of health workforce support networks; developing and strengthening career development and pathways for rural health workers; and adopting social recognition measures at all levels for health workers in rural and remote areas.

Source: WHO, 2021b

SERVICE DELIVERY FRONTIERS: CAPITALIZING ON TECHNOLOGICAL, ORGANIZATIONAL AND SOCIAL INNOVATIONS

The approaches used in service delivery in rural areas can greatly influence outreach, quality and inclusiveness of services.

Following analysis – entailing both data review and participatory methods – of who is being missed by services and has unmet needs, key bottlenecks to quality, reasons for distrust in/unsatisfaction with service providers, as well as analyses of cost-effectiveness and efficiency issues, changes can be made in how services are delivered in rural areas. Service delivery changes can make use of technological and social innovations, as well as optimization of service organization and linkages at different levels. States must ensure that innovations are not introduced for the sake of cost-saving alone or influenced by vested interests, but rather grounded in people-centred service delivery approaches and the commitment to leave no one behind.

It should be noted that each service delivery approach has its strengths and limitations. What can be extremely successful in one context might not achieve similar results in a different setting. As with all development interventions, there is “no-one-size-fits-all” approach. Adapting different approaches to different contexts, and engaging various categories of rural stakeholders and their organizations in the process of adaptation, are critical factors for improving inclusiveness. Also, complementarity of service approaches and links with different actors can increase outreach, promote innovation and support appropriation of new technologies. For this reason, when looking at the service system, it is key to consider the supply, demand and

enabling environment that characterizes it. This means identifying the service providers in a given area, assessing their capacities and comparing these with the demand, needs and feedback of service users, while understanding how policies and conditions affect the performance of the service system (FAO, 2017a). Box 8 features examples of people-centred service delivery approaches that draw on technological, social and organizational innovations.

“Adapting different approaches to different contexts, and engaging various categories of rural stakeholders and their organizations in the process of adaptation, are critical factors for improving inclusiveness”

Despite their power to help to reduce inequalities, the deployment of digital technologies can also widen the digital divide, leaving behind those without digital devices or skills even though they may benefit most. Special consideration should be given to adoption and outcomes of digital technologies for the rural poor including mobile populations, women, migrants and older persons, as well as people with disabilities (WHO Regional Office for the Western Pacific, 2021). To tackle the digital divide, it is important that countries develop and implement national broadband policies that include a commitment to reducing inequalities in ICT access. The United Nations has a critical role in working with countries to improve connectivity with the help of infrastructure to provide good speed Internet access, proper devices, sufficient amounts of data, and daily use of Internet.

Box 8. Examples of people-centred service delivery approaches in rural areas

Inclusive adult learning service delivery modalities in rural areas. Diverse approaches for adult learning in rural areas are applied worldwide, ranging from participatory and experiential learning to advanced digital technologies (FAO, 2018a). In the context of agriculture, examples include: farmer field schools that draw on local knowledge, experiential learning and group dynamics to deliver more relevant and inclusive services; farm business schools that offer curriculum-based participatory learning for farmers to learn about farm-business concepts, tools and practices, based on their local knowledge and skills; and digital/ICT-based methods, including radio, video and mobile phones, to connect farmers to various information sources and service providers. FAO's Dimitra Clubs programme in sub-Saharan Africa adopts a participatory and gender-sensitive approach embedded in community radio, while other approaches may use recent digital technologies mostly driven by expanding mobile phone networks in rural areas and advancements in mobile applications (FAO, 2018a). Digital Green is a global development organization that partners with governments, private agencies and, most importantly, rural communities to co-create digital solutions that are of the community and for the community (FAO, 2019). Digital Green engages communities and partner staff to create short videos capturing scientific and locally relevant best practices to be disseminated among the local community to improve smallholder farmers' productivity (FAO, 2018b).

Expanding access to essential digital services in rural settings. The Smart Villages project (ITU, 2020b) seeks to empower disadvantaged rural communities with access to basic digital infrastructure and services that can meaningfully improve their well-being and livelihoods and support their SDG-related needs. The Smart Villages project has been piloted in Niger. It aims to digitally transform remote rural communities by adopting a whole-of-society, holistic, multisectoral and inclusive approach to improving access to essential digital services in rural settings and acts as a "gateway to rural development" through the pooling and coordination of development programmes, in order to create the necessary synergy to sustain investments (ITU, 2020b).

Improving access to health services and improving efficiency in delivery in rural areas. Rural health care networks, use of the hub-and-spoke model for hospital services, use of multidisciplinary teams of providers, engagement of community health workers, and use of telemedicine and mobile health clinics are some of the innovative approaches that can be applied to reduce inequities in access while optimizing efficiency of health services in rural areas (OECD, 2021; WHO & UNICEF, 2020a). Rural health care networks can combine the resources of several hospitals to provide a range of services while seeking cost savings in areas such as purchasing or administrative costs (OECD, 2021). The hub-and-spoke model arranges care into a central "hub" hospital with a wide range of services and skills and smaller "spoke" hospitals with more limited services, supported by a strong referral system (OECD, 2021). Telemedicine can improve access to care and reduce travel and opportunity costs, while telehealth technologies – for those who can access them (see below) – can facilitate high-quality specialist consultations closer to home (OECD, 2021).

PUBLIC SECTOR FINANCING AND BUDGETARY MANAGEMENT PRACTICES

In the COVID-19 context, the threat of inequalities widening still further has been highlighted by a range of experts, including through Oxfam's survey of 295 economists across 79 countries (Deaton, 2021; ILO, 2021a; Oxfam, 2021; Stiglitz, 2020; World Bank, 2020). Many countries have responded to this heightened vulnerability through fiscal support and the expansion of social protection programmes. An analysis of income-support programmes in 41 countries suggests that income support may have mitigated, at least temporarily, the overall increase in poverty in upper-middle income countries but may have been insufficient to mitigate its increase in low-income countries (Fajardo-Gonzalez et al., 2021).

Severe debt vulnerabilities in developing countries may make fiscal consolidation through austerity measures appear inevitable, as shown in a recent UNDP paper (Jensen, 2021). As a result, the poorest and most in need – particularly in rural areas – may be hit hardest again and left further behind. According to Ortiz & Cummins (2021), austerity cuts may be expected, potentially affecting 5.6 billion people in 2021 and threatening to repeat the adverse effects of past austerity measures that followed recent financial crises. In their International Monetary Fund April 2021 working paper, Furceri et al. present evidence from past pandemics on fiscal consolidation through austerity measures and the impact on inequalities. They conclude that austerity measures impacting public spending on services could further exacerbate social inequalities, making the case that governments should try to maintain fiscal support until

economic recovery is assured (Furceri et al., 2021). For the rural poor, given the multiple deprivations they experience across a range of sectors and their reliance on government investment, further austerity measures could be detrimental and deepen the impacts of the concurrent crises at hand.

In keeping with the call to “form a New Social Contract and a New Global Deal that create equal opportunities for all and respect the rights and freedoms of all”, as envisioned by the United Nations Secretary-General Antonio Guterres in 2020 (Guterres, 2020), the COVID-19 situation calls for a combination of additional concessional financing, timely debt relief and transformative reforms. The latter would include strategic use of catalytic blended finance solutions to attract sustainable private investment, reduction of corruption and improvement of transparency (see below), and re-allocation of public expenditures, among others. Such transformation would allow: increased investment in rural service provision, yielding a social and economic multiplier effect; support for inclusive governance; innovative social protection measures, including temporary basic income measures where feasible; a more green and resilient recovery; and investment in digital transformation that is inclusive for all.

“Austerity measures impacting public spending on services could further exacerbate social inequalities, making the case that governments should try to maintain fiscal support until economic recovery is assured”

For many countries, and as cited in SDG voluntary national reviews, national budgets have been the link between countries' sustainable development objectives and domestic public spending (UNDESA, 2020c). As reported, for example, by Argentina, Bangladesh, Burundi, Gambia and Samoa, countries are mapping their budgets to the SDGs to implement stronger budgetary analysis and coordination mechanisms into SDG implementation plans across ministries. A useful tool championed by the United Nations Development Programme (UNDP) and implemented by the wider United Nations system are integrated national financing frameworks (INFFs). INFFs consist of four building blocks, namely: assessments and diagnostics; a financing strategy; monitoring and review; and governance and coordination (UNDP, 2020). They strengthen vertical integration between sustainable development aspirations and the policies governing each individual area of public and private finance, ensuring both horizontal and vertical policy coherence for a meaningful SDG localization at the subnational level, which is critical for rural development and decentralization. More than 60 countries are operationalizing the INFF concept with United Nations support. As a first and critical step of implementation that feeds into the INFF, SDG budget reports inform on costing of SDGs and are a tool for tracking a government's progress in filling the financing gap.

Crucially, SDG-aligned budgets encompass central as well as local financing and planning solutions to achieve the SDGs in both urban and rural areas, leaving no one behind. Furthermore, successful achievement of the SDGs in rural areas relies on integrated policies at the local level via vertical integration between national and local planning (i.e. vertical policy coherence to ensure that the 2030 Agenda for Sustainable Development trickles down at the subnational level). In several countries, local governments have integrated the 2030 Agenda into local planning

exercises and budgets, thus aligning local planning objectives with goals of the national plan and 2030 Agenda, thereby giving lagging rural regions the opportunity to thrive. These empower local institutions and municipalities such as Ghana's metropolitan, municipal and district assemblies by giving them a voice in public sector planning. In Burundi, for example, an SDG localization exercise was achieved by integrating the SDGs into municipal community development plans (UNDESA, 2020c). In Nepal, the Steering Committee for the implementation and monitoring of the SDGs also includes "Chief Ministers of all 8 provinces as well as presidents of associations of municipalities and district coordination committees as members" (UNDESA, 2020c). Another case in point is India, where the states and more than 700 districts drive the adoption of the SDGs and targets by determining local means of implementation (UNDESA, 2020c). Many countries have been striving to address the rural-urban divide by financing projects with a focus on rural areas, such as rural electrification schemes in Benin and Burundi, and innovative finance solutions in Bangladesh designed by the Central Bank of Bangladesh for rural areas (UNDESA, 2020c).

While demographic changes and the COVID-19 pandemic are putting financial pressure on rural areas, the OECD report *Delivering quality education and health care to all: preparing regions for demographic change* (2021) provides guidance on how to better manage the impact of these challenges on local finance. It highlights that many OECD countries have recently undertaken reforms in public spending and management to restructure public services and control spending. The report underlines the importance of subnational governments in funding and decision-making in education and health care services, for instance through transfers from central governments and control over parts of service provision such as primary education (OECD, 2021).

Blended finance entails “using small amounts of aid money to crowd-in private investors to support projects with development impact they would otherwise overlook”, offering potential opportunities to increase the resources available for development. With the COVID-19 pandemic projected to divert traditional external finance away from the least developed countries (LDCs), the 2020 OECD/United Nations Capital Development Fund (UNCDF) report calls for official development assistance to “be protected and leveraged to align more private finance in support of the SDGs in LDCs” (OECD/UNCDF, 2020). The digital finance revolution enables domestic resource mobilization, includes the voice of citizens in investment decisions and expands blended finance solutions to small and medium-sized enterprises. In this way, blended finance has the potential to bridge the digital and financial rural-urban divide, bringing innovative finance solutions to rural areas. A range of blended financing structures can thus address “barriers related to sustainable agriculture investments” and can increase SDG-related agriculture investments (Havemann et al., 2020) to promote inclusive and sustainable growth in rural areas.

Corruption, which is addressed by SDG 16, can contribute to and amplify inequalities in countries, including in rural areas. Some public services, such as those related to utilities and infrastructure, health, education, water and land, are particularly prone to corruption (OECD, 2015; Transparency International, 2009 & 2018; United Nations, 2019b). More disadvantaged populations and marginalized groups carry the heaviest burden of adverse effects of corruption. For example, resources can be channelled away from schools servicing students from poor rural households to areas where more privileged/affluent households live (Transparency International, 2009). In the

health sector, opportunities for corruption may include bribes, informal payments, embezzlement, nepotism and other forms of abuse of power (WHO, 2018b). Reflecting a reality that is prevalent in many countries globally, surveys in 33 African countries showed rates of informal payments for health care of less than 5% to more than 40% (Kankeu & Ventelou, 2016), with evidence of a socioeconomic gradient in informal payments in favour of the rich in almost all countries. Resource allocation towards ensuring the availability of medical products, goods and services in urban rather than rural areas may create a scarcity in rural areas that creates fertile ground for informal payments (Liu & He, 2020; Tomini & Marse, 2011).

Given the pre-existing gender inequalities in all societies, women tend to be more exposed to corrupt practices and their consequences when accessing services, credits and compensations or engaging in politics and political decision-making. Women face specific gender-based impacts such as severe rights violations, including sextortion, harassment and abuse (United Nations, 2020f). Corruption in public services in rural areas exacerbates inequalities while also increasing the overarching costs of service provision, and has indirect negative consequences such as lack of trust in the public sector (OECD, 2015). Accountable and effective governance to address corruption is a central ingredient in strengthening public sector financing and budgetary management practices.

“Corruption, which is addressed by SDG 16, can contribute to and amplify inequalities in countries, including in rural areas”

RAISING AWARENESS OF THE SECURITY DANGERS OF INEQUALITY, DISINVESTMENT AND WEAK STATE PRESENCE IN RURAL AREAS

Public service delivery plays a key role in the maintenance and, in some contexts, reinstatement of trust in the government and its institutions (Columbia University, 2015; IPI, 2017; United Nations, 2017b). Service delivery modalities are mechanisms that interface between the state and the population, with the power to foster social cohesion and strengthen the authority of the government over a country's territory in a legitimate manner (IPI, 2017). For example, establishing dialogue and grievance mechanisms that are accessible to all segments of the population can increase vertical trust between the state and the population (Maxwell et al., 2017).

Beyond the direct impact on the human rights of rural inhabitants, social inequalities and lack of investment and weak state presence in rural areas can have adverse consequences for peace and security. This has been true across the decades and persists today. A historical reminder of this is Sicily at the end of the nineteenth century, where social inequalities in rural areas and weak state presence gave rise to a strengthened Mafia (Acemoglu, De Feo & De Luca, 2020). In more recent times, for a range of countries experiencing humanitarian crises, there are examples of how the void left by the absence of the state or a weak state presence in rural areas is being filled by local self-defence forces (Columbia University, 2015) or by armed, terrorist or extremist groups (e.g. in Burkina Faso and Mali).

As rural development lags behind in a region, it generates negative externalities such as illegal economies, greater insecurity, violence and environmental destruction (Trivelli &

Berdegúe, 2019). The rural poor are hardest hit by all of these outcomes, and the associated insecurity and violence can result in massive displacement, massacres, dispossession of land and forced recruitment of children as soldiers (Escobar & Rico, 2019; Maxwell et al., 2017; Trivelli & Berdegúe, 2019). In humanitarian crises, internally displaced persons can overwhelmingly be of rural origin. For example, according to the Registry of Victims, between 1985 and 2016, there were 7 779 858 displaced persons registered in Colombia (CNMH, 2015). Of these, nine out of 10 displaced people were from rural areas, with victims predominantly moving from rural to urban areas.

“Establishing dialogue and grievance mechanisms that are accessible to all segments of the population can increase vertical trust between the state and the population”

In the light of the role that public service provision has in maintaining/establishing trust in the state and perceptions of state legitimacy (United Nations & World Bank, 2018), a lack of investment in service coverage in rural areas must be weighed against both human rights and security concerns. Likewise, in humanitarian and post-conflict contexts, investments in people-centred and equitable public service provision in rural areas – across sectoral domains – is an important part of peacebuilding and recovery efforts. In addition, local development planning that facilitates the establishment of integrated settlements of internally displaced persons, migrants, or refugees and local community members living in the same place can be beneficial for marginalized rural groups.

STRENGTHENING RURAL INSTITUTIONS, NETWORKS AND ORGANIZATIONS FOR PLURALISTIC SERVICE DELIVERY

In some countries, structural adjustments and reduced public spending over the past few decades have led to a decrease in public services coverage and outreach, especially in remote areas. The resulting gap has often been filled by a plurality of non-state actors and service providers operating independently or in partnerships with public sector or development partners (FAO, 2017a & 2017c). The changing institutional environment has led to rural services increasingly being provided by diverse actors and funded from different sources in what is known as pluralistic service systems.¹³ In such a pluralistic institutional setting, private companies, producer organizations and civil society currently play more important roles alongside traditional public sector service providers in delivering various basic services, as well as productive, advisory and market support services, in rural areas (FAO, 2017a).

Service provision could be improved if government and non-state providers collaborated more effectively (Batley, 2006). This is because the plurality of service providers offers opportunities for cost efficiencies that are currently un- or underexploited, such as potential synergies based on complementarities of service providers and service approaches, or organizational strengthening in rural areas¹²

for more relevant and cost-effective group approaches to service provision. Thus, the inherent potential of plurality needs to be utilized to address the challenge of service inequalities in rural areas and expand access for vulnerable groups (FAO, 2016a).

This plurality of actors implies a changing role for the state, from sole provider of services to that of regulator, coordinator and facilitator within an increasingly pluralistic setting (FAO, 2016a). In this context, regulation also needs to evolve to allow and encourage public and non-state actor partnerships. For effective service provision, change is needed in the way government institutions function, coordinate with each other and interact with other service providers. Such change eventually influences how the roles of different actors are perceived, what relationships and linkages exist, and what coordination mechanisms are in place. Coordination among a multitude of service providers becomes crucial to ensure efficiency and effectiveness in delivering services to those who need them most. Coordination requires clarity on roles, capacities, competencies and comparative advantages to define who is best positioned to deliver which services and to whom. Various actors can play coordination roles at different levels, ranging from public institutions registering service providers and regulating coverage and distribution, to community organizations liaising with governmental and nongovernmental organizations to set priorities and deliver services to their constituency. Box 9 provides an example of how this was done in the COVID-19 context in India.

¹³ Pluralistic service systems – in which a wide range of rural services are provided by different actors and funded from different sources – recognize the plurality of service providers and the potential to make services more inclusive, responsive to demands and adapted to the diverse needs of farmers (FAO, 2016a).

Box 9. The role of non-traditional service providers in India amid the pandemic

In recognition of the plurality of the service system in agriculture, the National Institute of Agricultural Extension Management¹⁴ of India researched the services provided by agri-input dealers¹⁵ amid the COVID-19 pandemic (Vincent & Balasubramani, 2020). Input suppliers are often a prime source of information to the farming community and provide a wide range of services, including farmer-to-farmer extension, ICTs, extension networking and market-led extension, among others. About 58% of the input dealers had linked their farmers to local buyers during the pandemic, nearly 50% had linked farmers with the Agricultural Produce Marketing Committee, and some service providers had linked their farmers with farmer producer organizations and nongovernmental organizations, among others. During this time, the use of ICT served to complement face-to-face extension services and extend access (Vincent & Balasubramani, 2020).

Public-private-nongovernmental organization partnerships and multistakeholder platforms are examples of mechanisms that, if implemented with a view towards addressing inequalities, have potential to improve coordination among public institutions and non-state actors in the provision of specialized services for which the government has limited capacity to deliver. Emphasis in this process is placed on strengthening local institutions and on enhancing the participation of rural people and their organization in co-provisioning of services that respond to their needs. Private and nongovernmental organizations can also partner with government institutions to promote publicly financed services to overcome logistical and financial challenges (Fox, 2008). Different financing and delivery arrangements such as outsourcing, cost sharing and cost recovery can be considered, and the expertise of specialized service providers can be better placed in responding to the specific needs of different categories of service users.

It is generally acknowledged that decentralization can help to reduce inequalities by bringing services and resources closer to rural populations. It can increase the quality, effectiveness and relevance of the services that are provided, ultimately maximizing the impact of the services on reducing poverty (Gwary, Makinta & Wakawa, 2019). However, even under decentralization, investments in infrastructure and basic services often do not reach the more isolated areas (FAO, 2018c & 2019). In addition, decentralization may exacerbate inequality when it does not take local governments' uneven capacity for service delivery fully into account (UNESCO, 2020a). For decentralization to deliver equitable development there is need to generate adaptive and innovative local governance with well-defined assignment of responsibilities across levels of government, accountability measures at the various levels and adequate central transfers, fiscal systems and enabling frameworks (Demirgüç-Kunt et al., 2017). Factors influencing the effectiveness

14 An organization of Ministry of Agriculture and Farmers' Welfare.

15 The study particularly looks at input suppliers who have benefitted from the one-year Diploma in Agricultural Extension Services for Input Dealers provided by the Government of India to "transform input dealers into para-extension professionals, thereby strengthening the agricultural extension system".

of a decentralized service system stand on the ability of local authorities to deal with pluralism. Local authorities may not have capacity in terms of resources, knowledge and skills; in addition, they may not be seen as having the legitimacy to take a leadership role and influence other actors. An effective pluralistic service system involves a shift in institutional mindset, allocation of resources and development of new capacities for institutions to engage in a multisectoral collaboration.

Box 10 provides an example of pluralistic service systems for agriculture. Beyond

agriculture, pluralistic service systems are most evident in health, education and social services, i.e. where public health services and private clinics operate within one regulatory framework; and public and private schools/institutes offer a wide choice of education programmes within common standards and clear governance and accountability. The wide choice of services offered by non-state actors in health and education frees up public service resources to improve access to and quality of services to populations experiencing marginalization and vulnerability, as well as coverage of services that are not offered by private actors.

Box 10. Examples of pluralistic service systems from the Philippines

In the Philippines, agricultural extension is delivered through a pluralistic system (Gasmen, 2019). This means that the Government recognizes the comparative advantage of non-traditional service providers to complement public service provision. According to OECD, there are six main types of service providers present in the country: 1) national departments led by the Department of Agriculture and their respective bureaus and agencies; 2) local government units; 3) state colleges and universities; 4) farmer associations such as cooperatives, irrigator associations, agrarian reform beneficiary associations, farmer-to-farmer (F2F)¹⁶ and agrarian reform communities; 5) nongovernmental and other civil society organizations; and 6) private sector e.g. agribusiness and banks (OECD, 2017). The Department of Agriculture is one of four key departments governing the agriculture sector in the Philippines, and with Local Government Code of 1991 (RA 7160) the Government embarked on a process of decentralization (GOVPH, 1991). Thus, extension services are delivered at the provincial, municipal and barangay¹⁷ level through the local government units (OECD, 2017). Through the Agricultural Training Institute, the Department of Agriculture provides technical support to the local government units. In recognition of the role that other stakeholders may have in service provision, the Agricultural Training Institute has partnered with the private sector for the promotion of e-commerce and new market opportunities. For example, the Eco Natural Integrated Farm, a certified learning site of the Agricultural Training Institute, used social media during the COVID-19 pandemic to market farm products in the Province of Tarlac, Central Luzon (ATI, 2020).

16 The F2F approach is a systematic utilization of community leadership and informal communication between farmers. It aims to strengthen the information flow and enhance the agricultural production.

17 "As the basic political unit, the Barangay serves as the primary planning and implementing unit of government policies, plans, programs, projects, and activities in the community, and as a forum wherein the collective views of the people may be expressed, crystallized and considered, and where disputes may be amicably settled" (GOVPH, 1991b, pp. 1).

COMMUNITY ENGAGEMENT AND SOCIAL ACCOUNTABILITY

Weak social capital, or lack of trust among individuals and social groups, is detrimental to economic growth (Whiteley, 2000; Ponzetto & Troiano, 2018). Prosperity for a majority of the people can only be attained if adequate investment is made in social capital. Such investment should include provision of physical goods, services and facilities, creation of participatory spaces, and establishment of supportive institutions. Participatory spaces for strengthening service provision in rural areas will require whole-of-government and whole-of-society approaches (WHO, 2021b). These platforms should be accessible to disadvantaged subpopulations in rural areas that may face challenges in participating due to adverse gender norms, distance, lower levels of literacy, language barriers and/or lack of access to computers or phones (WHO, 2021g).

Social dialogue between national authorities, employers and workers, based on respect for freedom of association and the effective recognition of the right to collective bargaining, is key in the promotion of decent and sustainable work in rural areas. Strong, independent and effective organizations of rural workers and employers is a prerequisite to fostering social dialogue in rural areas and to enabling the participation of rural communities in economic and social development. Social dialogue sets the foundations for rural areas to prosper, and is a key pillar of coordination among institutions and social partners for addressing inequalities in rural areas. Other types of collective action¹⁸ complement social dialogue in rural areas, where the collective

voice of workers and employers is often weak. Collective action is an important driver of workable solutions for equitable and inclusive provision of services.

Rural organizations, including women's organizations, cooperatives, producer associations and self-help groups are examples of institutions (both formal and informal) that engage in consultation (on issues such as acceptability) and collective action to improve service provision to their members and communities. Rural organizations play multiple roles in delivering services, articulating demands and representing their communities and members in policy dialogue and development processes; however, their participation is often constrained by weak internal mechanisms¹⁹ and limited capacities and skills to carry out these functions effectively. In addition, due to rooted gender inequalities and discriminatory gender norms, rural women often face specific constraints (e.g. lack of collateral) to participate as members and leaders of these institutions. Thus, appraising the capacities of rural organizations, and defining organizational development needs and skill gaps, should be a starting point for building relevant and gender-equitable institutions, empowering the poor and developing capacities for meaningful participation.

“Strong, independent and effective organizations of rural workers and employers is a prerequisite to fostering social dialogue in rural areas”

¹⁸ Collective action: voluntary action to collaborate in pursuit of a common goal taken by a group (Marshall, 1998 in FAO, 2012).

¹⁹ Rural organizations can be, for example, male dominated (especially in decision-making positions), leaving female members with limited say.

INVESTING IN SERVICES THAT FOSTER INTERGENERATIONAL INCLUSION

Investments in building forward better for the rural poor must target rural youth, who are on the borderline to enter or exit farming, i.e. to stay and make a living in the rural area or leave in search of alternative livelihoods in urban centres. In addition, given that rural areas in many countries have increasing proportions of older people living in them, especially low- and lower middle-income countries, investments in services that ensure the social and economic inclusion and well-being of older people, including older women, are salient (HelpAge International, 2014; OECD, 2020b; WHO, 2021d).

There is a need for youth-specific services and creation of skills development and job opportunities for youth, whether they are formal learners, farmers, agripreneurs, self-employed workers or wage labourers. Equally important is attention to service gaps that can constitute opportunities for youth employment as potential service providers in their own right, or as employees within the service arms of cooperatives and producer organizations (Petrics et al., 2018). This is specifically relevant for services requiring a level of education and technology aptitude, including business development, mechanization, transport, processing, certification, marketing and new applications of ICTs in agriculture. Innovation is needed for the engagement of young people in rural services, both as users and as potential providers (FAO, 2018c). Due attention needs to be paid to gender aspects for the provision of sufficient and quality basic and productive services, as gender roles can simultaneously limit options and offer opportunities to young rural women and men in the context of rural transformation. To be effective, policies and investments to support

rural youth to become prosperous adults must be tied into national and local strategies, policies and programmes. Such investments and policies also need to fit into sectoral programmes serving rural youth, such as health (including sexual and reproductive health), education, agriculture and employment. That requires sophisticated collaboration between institutions.

“Efforts to tackle ageism, against both older and younger people, in rural areas is important for ensuring the human rights and economic productivity of rural populations”

Many of the same areas of focus required for youth inclusion (and listed in the paragraph above) also apply for the social and economic inclusion of older persons in rural areas. Trend analyses of the age of agricultural holders shows that the proportion of older farmers is significant and growing and is expected to accelerate in the future (FAO, 2017d; HelpAge International, 2014). The majority of economically active older people in rural areas derive their livelihood from agriculture, making it essential that they have equitable access to related productive services and support (FAO, 2017d; HelpAge International, 2014). Older farmers living in poverty may be particularly affected by environmental degradation, climate change and limited access to agricultural technology, a situation compounded by discrimination against older rural people in accessing credit, training and other income-generating resources (FAO, 2017d). Efforts to tackle ageism, against both older and younger people, and account for life-course needs in service delivery in rural areas is important for ensuring the human rights and economic productivity of rural populations.

ADDRESSING INTERNAL CYCLICAL MIGRATION AND THE RURAL-URBAN CONTINUUM IN SERVICE PROVISION

COVID-19 has further exposed the false dichotomy of rural versus urban poor. From a people-centred perspective, a person who is raised experiencing poverty in a rural area may migrate to become urban poor as a young adult, and in the crux of a global crisis such as COVID-19, she/he may return to her/his rural homeland, as millions have done across the globe. Even in the absence of a crisis, such cyclical movement is frequent, whether it be in response to seasonal work, family obligations, life-course events such as pregnancy and childbirth, illness or other

factors. Regular commuting – such as informal traders coming to cities to sell rural products – is also widespread, often involving several days of travel and semi-permanence in cities. Fundamentally, rural-urban bidirectional movement by persons experiencing poverty is a reality, yet it is neglected by dominant development paradigms and, often, in the conceptualization of service delivery approaches.

There is clear evidence that policies that build on and acknowledge rural-urban linkages can result in development gains (IFAD, 2016a; OECD, 2016; UN-Habitat, 2019 & 2020) for individuals, communities, societies and the economy. Box 11 provides examples of projects and governance to strengthen rural-urban linkages.

Box 11. Examples of governance for strengthening rural-urban linkages

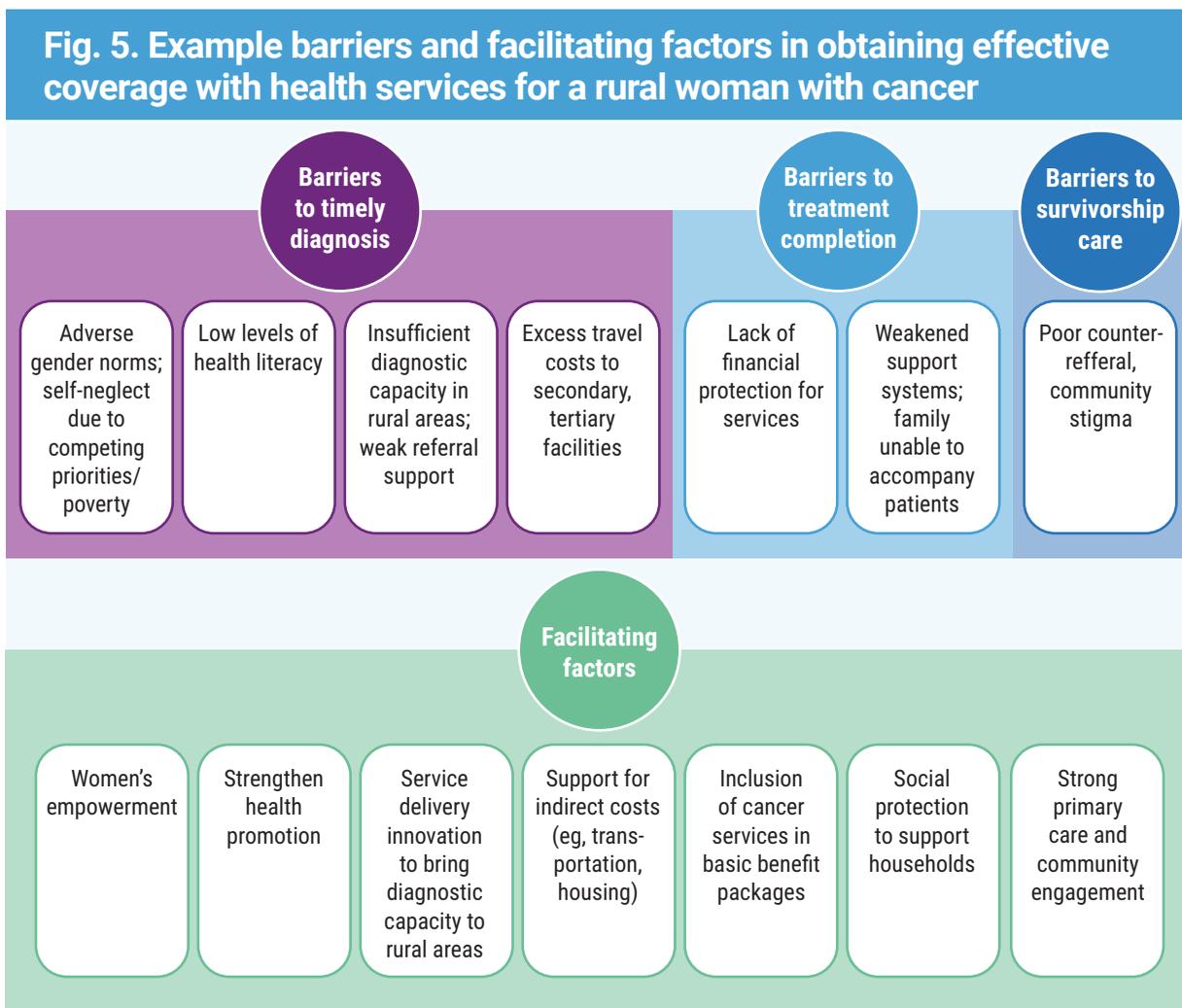
Nepal developed its Rural Urban Partnership Programme more than 20 years ago after reaching the conclusion that strengthening urban-rural linkages was critical to both urban and rural development challenges. Multiple ministries at the national level worked together with municipalities and rural market centres to address areas of improved governance, transportation, economic development and microfinance support for women's enterprises. This programme is an early example of effective vertical integration across levels of governance and horizontal integration of urban and rural communities. The process also brought village organizations into governance and planning processes to equalize urban and rural interests.

The Rurbance Initiative from Europe is a six-country cross-jurisdictional programme linking rural and mountain communities with urban communities close to and dependent on the European Alps. This project brings rural and urban actors together as equal players to address multiple challenges in environmental, social and economic dimensions. Issues include landscape degradation, lack of water and soil quality, loss of biodiversity, territorial fragmentation, abandonment of territories, intensive use of resources, social problems and worsening of quality of life. Participatory processes of co-visioning, co-development and co-creation for balanced urban and rural territorial development brought forth a legislative framework for multiple levels of local, regional and national regulations.

Source: Case-studies reprinted with permission from UN-Habitat, 2020.

In the case of health, rural-urban linkages can promote health, as shown in Fig. 5. When rural primary health care services have sufficient capacity and are able to effectively connect patients with secondary and tertiary facilities in towns and intermediary cities in a way that removes barriers, lives can be saved. The example in Fig. 5 is for cancer management, a disease for which diagnosis and treatment can be inaccessible for the rural poor and particularly for women. Women living in rural areas and with low socioeconomic status may encounter long delays in diagnosis and experience interruption or abandonment of

therapy for common female cancers, such as breast or cervical cancer (WHO, 2017b). In India, for example, in 2020 there were an estimated 413 381 cancer deaths among women (WHO, 2021f). In India, most breast and cervical cancer deaths occur among women living in rural areas and with low socioeconomic status, who are less able to access to high-quality cancer diagnosis or treatment facilities situated in urban centres and which are often private, posing both geographical and financial accessibility barriers (Dikshit et al., 2012; Ginsburg et al., 2017).



Source: Adapted (by co-authors Koller TS and Ilbawe A) from Devarapalli et al., 2018; Ginsburg et al., 2017; Learmontha et al., 2015; McDonald et al., 2016; Unger-Saldana & Infante-Castenda, 2011; WHO, 2017b; WHO, OECD & World Bank; 2018; WHO Regional Office for Europe, 2015.

INVESTING IN INTERMEDIARY CITIES

Intermediary cities are small and medium-sized urban agglomerations that play an intermediation role to connect metropolitan and rural areas, as well as different groups of cities, within urban systems. Although intermediary cities are mainly defined by their function(s), they can also be identified in terms of their size, which ranges between 50 000 and 1 million inhabitants (UN-Habitat, 2019). In practice, intermediary cities act as hubs for the provision of goods and services; facilitate rural-urban and circular migration; and provide a conducive environment for income diversification. Moreover, these cities can be a catalyst for economic development and poverty alleviation.

Intermediary cities are strategically located for meeting the needs of the rural poor and are potential powerhouses for contributing to transformative rural development, i.e. through building/safeguarding human, social, political and natural capital in rural areas, which then contributes to overarching national sustainable development and also more sustainable urbanization trends/patterns. Their role goes beyond the traditional dichotomy of urban and rural to leverage complementary development and functional relations.

Investment in intermediary cities supports the creation of a sound hierarchy of services and ensures that services are available to surrounding rural areas (UN-Habitat, 2019). Coupled with better road and transport connectivity, such investment can ensure better access to services and is a key dimension of “in situ urbanization²⁰” (United Nations, 2021).

When local supply chains and opportunities are supported, it can help to generate local development processes and sustain improvements in living conditions in rural and urban areas. Well-equipped intermediary cities also reduce migration trajectories and can offer additional benefits to rural areas in terms of markets for their products and opportunities for circular economy.

“Achieving a balance between proximity and the economy of scale necessary for certain levels of services requires integrative and inclusive urban, territorial and rural policy and planning”

Achieving a balance between proximity and the economy of scale necessary for certain levels of services requires integrative and inclusive urban, territorial and rural policy and planning. Plans should consider the different scales of urban and rural settlements in systems of cities and towns of different sizes, as well as the existing functional, territorial and ecosystem-based interlinkages between urban and rural settlements and land use (including remote hinterlands and outer islands) (UN-Habitat, 2019). There is a need to improve understanding of such interlinkages. This would result in consideration of rural development needs – including regional connectivity between cities and rural areas – within national urban policies and plans that facilitate the secure flow and movement of goods, services and labour, while supporting

20 In situ urbanization refers to the improvement of the standard of living of the rural population to the urban level, without converting rural areas into urban areas (in the sense of the size and density of population) (United Nations, 2021).

positive synergies across the urban-rural continuum in terms of overall development and service delivery in particular.

Investment in intermediary cities and linked rural territories requires further empowerment of local authorities and civil society groups to influence regional planning and policy. It requires empowering them to take action in addressing service gaps through the development of coherent governance structures across sectors, administrative boundaries and levels of government. Fragmented governance structures often leave rural, urban and provincial authorities operating independently without any means of aligning their policies, despite their shared interests, and can hinder sectoral coordination and synergies. The establishment of regional boards or other bodies with the

political representation and power to cooperate, unify and manage networks of cities or municipalities and agglomerations could help to address these gaps. During the COVID-19 pandemic, very important gains in access to public services and in particular health care and other protection measures were demonstrated when such coordination has been possible.

Specialized services for rural populations in cities can play an important role to support and improve the outcomes of regular movements of populations and cyclical migrations or commuting through area-based approaches, careful management of public spaces and services, and integration of different services targeting a specific population group. Box 12 provides an example of specialized services for rural people in a South African city.

Box 12. Specialized services for rural populations in cities

In Durban, South Africa, the area of Warwick Junction hosts a large retail and traditional market of about 4000 traders that has been completely reorganized and equipped with specialized services, security and temporary accommodation, thus allowing rural vendors to conduct business, access services and support positive urban-rural linkages. Rural vendors come into the city to sell their products and only depart when they have managed to sell everything, which can sometimes be after a whole month. Therefore the temporary accommodation, and having a space to lock-up the products for the night, is extremely important. The city council adopted an area-based management approach and formed special teams to improve services and facilities in Warwick Junction, such as cleaning and rubbish removal, the provision of toilets, childcare facilities and the formalization of informal drinking outlets in the market. The careful design of the market spaces has provided a dignified and safe working environment, and the experience impacted very positively on the access of rural poor traders to city services and opportunities, combining economic and social mechanisms, and has led to a vibrant community organization of traders to sustain these gains. The mutual benefits of such an organized and integrated approach for rural and urban dwellers have been significant.

Source: Internal communication from UN-Habitat, 2021.

INVESTING IN SERVICES THAT SAFEGUARD AND STRENGTHEN NATURAL CAPITAL

As highlighted in the *World social report 2021*, most of the natural capital of a country is located in rural areas and rural development strategies have a critical role in preserving and investing in natural capital (United Nations, 2021). Biodiversity loss; the depletion, pollution and degradation of water bodies; the loss/ degradation of global forest cover; and rising global greenhouse gas emissions directly related to agricultural and land use changes are some of the consequences of weak land and natural resource management in rural areas (United Nations, 2021).

While not always perceived as such by the general public, environmental services provided by the state are critical public services. These services can relate to forest management, land use management, water supply and treatment, solid waste management and treatment, energy (including renewable energy), recycling, river basin management, ocean and coastline management, flood and other natural disaster protection, nature and landscape protection, wildlife and biodiversity protection, and remediation and clean-up of soil and water, among other environmental and ancillary services (including those related to testing levels of pollution/contamination or environmental risks).

In the context of building forward better for the rural poor, such services (when promoting environmentally sound and sustainable methods) can generate both employment and public goods while being fundamental for longer term sustainable development. In addition, cross-sectoral services – such as those encompassed in the One Health

approach – recognize the interconnectedness between humans, animals, plants and the environment, while also contributing to economic growth and protection against threats. The One Health concept is particularly relevant for investing in the rural poor who, because of their close contact with domestic animals and wildlife, are central players in the human-animal interface. They also have critical roles in the conservation of rural biodiversity and agroecology, roles predominantly undertaken by indigenous women. In the process of building forward better, the human-animal interface requires much greater attention when it comes to protecting the world from the impact of zoonotic pathogens (including SARS-CoV-2). Investing in public services related to the human-animal interface as part of a One Health approach can help to prevent future pandemics and their tragic health, economic and social consequences.

Current rural development strategies could improve the extent to which they are environmentally friendly and conducive to the achievement of the planet-related SDGs (United Nations, 2021). The *World social report 2021* explicitly calls for a scaling up and strengthening of governance and services related to: 1) protecting water and land resources from depletion, degradation and pollution; 2) promoting mixed, circular and organic farming; 3) protecting indigenous seed banks and species; and 4) creating and strengthening local government institutions that are necessary for ensuring environmental sustainability of rural development (United Nations, 2021). Strong emphasis on these areas is not only required in rural development strategies, but also in national development strategies and resource allocation, as environmental services hold the key to sustainable futures for humankind.

Part III: Advancing the agenda

STRONGER INVESTMENTS IN HUMAN RIGHTS AND RURAL HUMAN, SOCIAL, NATURAL AND POLITICAL CAPITAL

An increased focus on rural poverty and inequalities will direct attention to the upstream causes of many of the global development challenges experienced today. Disinvestment in and neglect of rural development and the rural poor contributes to environmental degradation, global food insecurity, adverse public health consequences (including zoonoses outbreaks), mistrust in public authorities and social unrest, and mass out-migration (e.g. the rural poor become the urban poor), to name a few of the impacts (FAO, 2020c; IFAD, 2019a; IOM, 2017; United Nations, 2020c; United Nations & World Bank, 2018). An increased focus on tackling rural poverty and reducing inequalities in rural areas across all sectoral domains does not detract from efforts towards equitable urban development; rather, only by addressing poverty in both rural and urban areas, as well as improving rural-urban linkages and the role of intermediary cities, can the pathway to holistic national and global sustainable development be built.

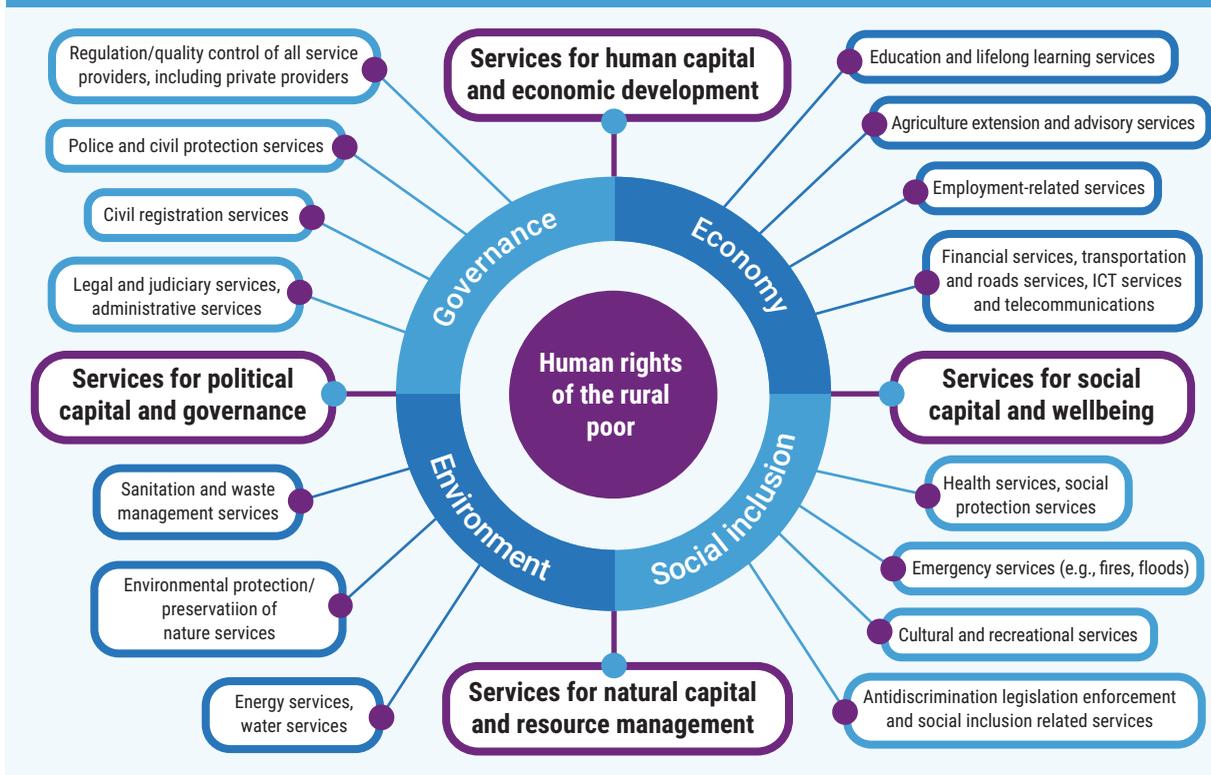
For rural populations experiencing deprivation, equitable coverage with public services enables fulfilment of many basic human rights and is a pathway out of poverty. The United Nations Secretary-General's *Call to action on human rights* (United Nations, 2020g) underlines the

critical role of policies that support the most vulnerable and/or excluded groups, recognizing and responding to multiple and intersecting deprivations and sources of discrimination that limit opportunities. This brief has aimed to highlight the challenges to human rights posed by inequalities in rural public service provision and entry points for overcoming them through scaled up action for transformative, integrated multisectoral rural development.

Public services are fundamental investments in human agency. In the context of rural development, they are essential investments in rural human, social, natural and political capital (see Fig. 6). Public services are needed for rural populations' well-being and productivity, violence prevention and social cohesion, resilience in the face of crises (FAO, 2021), and optimizing the contribution of rural areas to national sustainable development agendas. Strengthening these services must be central to efforts by national and subnational authorities to build forwards better in the midst of the negative socioeconomic impacts of the COVID-19 pandemic. Applying a human rights lens to reducing inequalities in public service provision can provide a powerful policy response to ensure that the agency and voice of marginalized groups are not neglected (IOE & IFAD, 2018).

“Public services are fundamental investments in human agency”

Fig. 6. Examples of public services in rural areas and their contribution to sustainable development



Source: The authors. **Note:** this set of examples is not exhaustive, and often one service contributes to multiple types of capital.

THE “MULTIPLIER EFFECT” OF INVESTING IN SERVICES

In the context of the concurrent COVID-19 crises, investing in rural service provision can have an economic and social multiplier effect, contributing to revitalization of rural areas through economic growth, preserving/fostering social cohesion, preventing destabilization and improving quality of life. In stimulus planning, the “multiplier effect” refers to the proportional amount of increase in final income that results from an injection of spending (often measured per unit of currency spent). As governments consider stimulus packages to address the fiscal and socioeconomic impacts of COVID-19, lessons from past crises on economic multipliers must be considered.

Supporting investments in services in rural areas that may have historically been viewed more as a “cost” (e.g. health, education and social protection) can have particularly large returns on investments due to their economic multiplier size (Stuckler, Reeves & McKee, 2017). For example, evidence from high-income countries points to the significant economic contribution to rural communities of medical schools (including distributed medical education) and the health sector as an employer and purchaser (Hogenbirk et al., 2015; OECD, 2010). In fact, during the pandemic, many countries have strengthened their public social services for populations experiencing vulnerability, contributing to closing the gaps in access to health services including among rural populations (ILO, 2021a).

COMMITTING TO TRANSFORMATIVE RURAL DEVELOPMENT PLANNING TO TACKLE INEQUALITIES IN RURAL SERVICE COVERAGE

In both the policies and programming of national authorities and the multilateral system, more can be done – across sectoral domains – to strengthen the commitment to transformative, integrated and multisectoral rural development planning. Rural proofing, as described in Part II, is an important component of this. While rural proofing is clearly relevant at national level, it must also be considered as an important measure by the international community (donors, the United Nations system, international nongovernmental organizations, etc.) to ensure that investments have an impact on the world's extreme poor, the majority of whom live in rural areas.

Building forward better for the rural poor means critically looking beyond sectoral silos. As OECD stated in their rural development toolkit for developing countries: “International donors tend to target their resources and efforts in specific economic sectors or themes” (OECD, 2016). Due attention is required by national authorities and the international community to ensure that sectoral policies and support/investments for services not only account for the needs of the rural poor, but that they do so in ways that maximize complementarities across sectors.

The document *Leaving no one behind: equality and non-discrimination at the heart of sustainable development: a shared United Nations System framework for action* (United Nations, 2017a) provides orientations for the United Nations work on rural poverty and inequalities. It clearly calls for the United

Nations to have a “package of policy and programme support” for tackling inequalities and to provide support to national and subnational authorities in reducing spatial or geographical inequalities between rural and urban areas, as well as inequalities between women and men and different subpopulations (e.g. indigenous groups) in rural areas. Given the stark rates of extreme income poverty and multidimensional poverty in rural areas, and the low performance of the rural poor for many SDG indicators, this package of policy and programme support must be a cornerstone of continued efforts by the United Nations to support Member States towards the 2030 Agenda for Sustainable Development.

Shifts in development paradigms are advanced through incremental steps, with awareness leading to individual, joint and then collective action. Members of the United Nations High-level Committee on Programmes (HLCP) Inequalities Task Team, while acknowledging that COVID-19 has provided an opportunity to take stock and re-assess the role of our organizations with regards to inequalities, have identified improving rural service coverage as an important area of focus for joint work in building forward better. Building on Part II of this brief, which identified entry points for action more generally, Box 13 delineates activities that the “rural inequalities subgroup” (see Acknowledgements) of the Task Team recommends the United Nations to advance in its support of SDG progress for the rural poor. These activities are in keeping with the key recommendations of the United Nations Secretary-General's annual report on rural poverty, while deepening the focus on tangible specific United Nations system actions for tackling inequalities in rural service coverage and promoting transformative rural development policy.

Box 13. Priority areas for cross-United Nations action to tackle inequalities in rural public service coverage

1. In keeping with the United Nations document *Leaving no one behind: equality and non-discrimination at the heart of sustainable development: a shared United Nations System framework for action* (United Nations, 2017a), continue to advance a “package of policy and programme support” for tackling inequalities; this package should include **a consolidated, interlinked and synergistic set of tools and resources** for reducing inequalities in public service provision in rural areas.
2. Develop a **joint communication and knowledge management guide/strategy** that facilitates more coordinated action of United Nations agencies for reducing inequalities in public service provision in rural areas and advancing transformative multisectoral rural development planning.
3. Join forces at country level to support and pilot/apply **transformative multisectoral rural development planning with a focus on service provision**, breaking siloed approaches to responding to the needs of rural populations through the application of the United Nations Sustainable Development Group (UNSDG) guide for country teams on leaving no one behind (UNSDG, 2019) and other relevant cross-cutting aids for enhancing the focus on “tackling inequalities” in common country assessments and cooperation frameworks.
4. Develop and promote the use of **guidance/resources for rural proofing** of sector-specific policies, strategies and plans, under the broader framing of transformative multisectoral rural development planning and service provision. This can be accompanied by agency-to-agency exchange on methods.
5. Continue to facilitate that **United Nations reports on progress towards the SDGs**, across sectoral domains and by all agencies, include the appropriate focus on addressing rural inequalities in service coverage. This means inclusion of disaggregated data and rural-specific analyses on access to services, and case-studies of progress, bottlenecks/barriers and opportunities to scale up action towards the SDG targets. It also entails adequate attention to rural-urban linkages and the role of intermediary cities in the service continuum contributing to rural poverty reduction.
6. To benefit national authorities and partners working on rural development (across sectors), encourage **joint United Nations capacity-building platforms/initiatives** on transformative multisectoral rural policy and tackling inequalities in rural service coverage, in which all relevant agencies share their expertise.
7. **Collaborate with key players** in the multilateral system, including OECD, the World Bank and regional development banks as well as bilateral donors, among others, to better streamline efforts for transformative rural policy and improving rural service coverage, while also supporting platforms for the equitable participation of rural community members in the design, implementation, monitoring and evaluation of interventions that impact their lives.
8. During 2022, **update the HLCP** on efforts to tackle inequalities in rural service coverage and further advance joint planning for improving the lives of the rural poor in the context of responding to and building forward better from COVID-19.

References

- Abouzahr C, De Savigny D, Mikkelsen L, Setel PW, Lozano R, Nichols E et al. (2015). Civil registration and vital statistics: progress in the data revolution for counting and accountability. *Lancet*. 386(10001):1373–85. doi:10.1016/S0140-6736(15)60173-8.
- Acemoglu D, De Feo G, De Luca GD (2020). Weak states: causes and consequences of the Sicilian Mafia. *Review of Economic Studies*. 87:537–81. doi:10.1093/restud/rdz009.
- ADB (2012). The Saemaul Undong movement in the Republic of Korea: sharing knowledge on community-driven development. Mandaluyong City: Asian Development Bank (<https://www.adb.org/sites/default/files/publication/29881/saemaul-undong-movement-korea.pdf>).
- Ali A, Ahmed M, Hassan N (2020). Socioeconomic impact of COVID-19 pandemic: evidence from rural mountain community in Pakistan. *J Public Affairs*. e2355. <https://doi.org/10.1002/pa.2355>.
- Arrazola J, Masiello MM, Joshi S, Dominguez AE, Poel A, Wilkie CM et al. (2020). COVID-19 mortality among American Indian and Alaska native persons – 14 states, January–June 2020. *MMWR Morb Mortal Wkly Rep*. 69:1853–6. doi:<http://dx.doi.org/10.15585/mmwr.mm6949a3>.
- ATI (2020). Agriculture amid COVID-19. Access: the official publication of the Agricultural Training Institute: special edition. Quezon City: Department of Agriculture, Agricultural Training Institute (<https://ati.da.gov.ph/ati-main/sites/default/files/publications/ACCESS%20%20Special%20Issue%20on%20COVID19.pdf>).
- Baah-Dwomoh JK (2016). Integrated rural development in Africa: back to the future. Background paper for the African Transformation Report 2016: transforming Africa's agriculture. Johannesburg: African Centre for Economic Transformation (http://acetforafrica.org/acet/wp-content/uploads/publications/2016/09/IntegratedRuralDevelopment_PAPER.pdf).
- Balfour RJ, De Lange N, Khau M (2012). Rural education and rural realities: the politics and possibilities of rural research in Southern Africa. *Perspectives in Education*. 30(1):i-ix. <https://journals.ufs.ac.za/index.php/pie/article/view/1725>.
- Batley (2006). Engaged or divorced? Cross-service findings on government relations with non-state service-providers. *Public Admin Dev*. 26:241–51. <https://doi.org/10.1002/pad.422>.
- Bellinger N, Kattelman KT (2021). Domestic terrorism in the developing world: role of food security. *J Int Relat Dev*. <https://doi.org/10.1057/s41268-020-00191-y>.
- Bhatia A, Ferreira LZ, Barros AJD, Victora CG (2017). Who and where are the uncounted children? Inequalities in birth certificate coverage among children under five years in 94 countries using nationally representative household surveys. *Int J Equity Health*. 16(1):148. doi:10.1186/s12939-017-0635-6.
- BMZ (2017). Leave no one behind: insights from Cambodia's national poverty identification system. Bonn: Federal Ministry for Economic Cooperation and Development (BMZ) [https://health.bmz.de/ghpc/case-studies/leave-no-one-behind/ID_POOR_Final_lowres.pdf, accessed 14 January 2021].
- Branford S, Torres M (2017). Quilombolas' community land rights under attack by Brazilian ruralists [website]. Mongabay, 25 August 2017 (<https://news.mongabay.com/2017/08/quilombolas-community-land-rights-under-attack-by-brazilian-ruralists/>, accessed 14 January 2021).
- Bundervoet T, Dávalos ME, Garcia N (2021). The short-term impacts of COVID-19 on households in developing countries: an overview based on a harmonized data set of high-frequency surveys. Policy research working paper no. 9582. Washington, DC: World Bank (<https://openknowledge.worldbank.org/handle/10986/35290>, accessed 21 July 2021).
- Cattaneo A, Nelson A, McMenomy T (2021). Global mapping of urban–rural catchment areas reveals unequal access to services. *PNAS*. 118(2):e2011990118. <https://doi.org/10.01073/pnas.2011990118>.
- CERD (2011). General recommendation no. 34 adopted by the Committee: Committee on the Elimination of Racial Discrimination: racial discrimination against people of African descent, 3 October 2011, CERD/C/GC/34. Geneva: UN Committee on the Elimination of Racial Discrimination (<https://www.refworld.org/docid/4ed350d82.html>, accessed 7 May 2021).
- CGIAR (2020). CGIAR COVID-19 Hub: update on the CGIAR research response to COVID-19, December 2020. Washington, DC: CGIAR Research Program on Agriculture for Nutrition and Health, International Food Policy Research Institute (<https://a4nh.cgiar.org/files/2020/12/COVID-19-Hub-Update-December-2020.pdf>, accessed 14 January 2021).

- CNMH (2015). Una nación desplazada: informe nacional del desplazamiento forzado en Colombia. Bogotá: Centro Nacional de Memoria Histórica (CNMH) (<http://www.centrodehistoriahistorica.gov.co/descargas/informes2015/nacion-desplazada/una-nacion-desplazada.pdf>, accessed 21 July 2021).
- Columbia University (2015). Extending legitimate state authority in post-conflict countries: a multi-case analysis. Capstone report, May 2015. New York, NY: Columbia University SIPA (<https://www.sipa.columbia.edu/academics/capstone-projects/extending-state-authority-and-legitimacy-post-conflict-countries>, accessed 29 July 2021).
- Couper I (2018). Place in the sun: reflections on relationships, rules, and rurality. Inaugural lecture delivered on 4 September 2018. Stellenbosch: Stellenbosch University (http://www.sun.ac.za/english/Documents/InauguralPublication_ProfICouper_29Aug2018.pdf, accessed 14 January 2021).
- CTA (2019). The digitalisation of African agriculture report 2018–2019. Wageningen: The Technical Centre for Agricultural and Rural Cooperation (CTA) (<https://www.cta.int/en/digitalisation-agriculture-africa>, accessed 14 January 2021).
- Deaton A (2021). COVID-19 and global income inequality. Version 4, revised March 9 2021. LSE Public Policy Review. (https://www.princeton.edu/~deaton/downloads/International_income%20inequality_and_COVID_v3_March5_figures.pdf, accessed 19 July 2021).
- De La O Campos AP, Villani C, Davis B, Takagi M (2018). Ending extreme poverty in rural areas – sustaining livelihoods to leave no one behind. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/CA1908EN/ca1908en.pdf>, accessed 14 January 2021).
- Demirgüç-Kunt A, Klapper L, Singer D, Ansar S, Hess J (2017). The Global Findex Database 2017: measuring financial inclusion and the fintech revolution. Washington DC: World Bank (https://globalfindex.worldbank.org/sites/globalfindex/files/2018-04/2017%20Findex%20full%20report_0.pdf, accessed 21 July 2021).
- Devarapalli P, Labani S, Nagarjuna N, Panchal P, Asthana S (2018). Barriers affecting uptake of cervical cancer screening in low and middle income countries: a systematic review. *Indian J Cancer*. 55(4):318–26. doi:10.4103/ijc.IJC_253_18.
- Dikshit R, Gupta PC, Ramasundarahettige C, Gajalakshmi V, Aleksandrowicz L, Badwe R et al. (2012). Cancer mortality in India: a nationally representative survey. *Lancet* 2012; 379: 1807–16. doi:10.1016/S0140-6736(12)60358-4.
- Ekoh PC, Agbawodikeizu PU, Ejimkararonye C, George EO, Ezulike CD, Nnebe I (2020). COVID-19 in rural Nigeria: diminishing social support for older people in Nigeria. *Gerontol Geriatr Med*. 6:2333721420986301. doi:0.1177/2333721420986301.
- Escobar M, Rico D (2019). La producción y explotación ilegales de materias primas en las zonas rurales de América Latina y sus líneas de impacto en el desarrollo territorial. Serie 2030 – Alimentación, agricultura y desarrollo rural en América Latina y el Caribe, no. 27. Santiago de Chile: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/ca5218es/ca5218es.pdf>, accessed 14 January 2021).
- European Union/FAO/UN-Habitat/OECD/World Bank (2021). Applying the degree of urbanisation: a methodological manual to define cities, towns and rural areas for international comparisons – 2021 edition. Luxembourg: Publications Office of the European Union (<https://ec.europa.eu/eurostat/documents/3859598/12519999/KS-02-20-499-EN-N.pdf/0d412b58-046f-750b-0f48-7134f1a3a4c2?t=1615477801160>, accessed 20 July 2021).
- Fajardo-Gonzalez J, Molina GG, Montoya-Aguirre M, Ortiz-Juarez E (2021). Mitigating poverty: global estimates of the impact of income support during the pandemic. New York, NY: United Nations Development Programme (<https://www.undp.org/publications/mitigating-poverty-global-estimates-impact-income-support-during-pandemic>, accessed 29 July 2021).
- FAO (2003). Food, agriculture and rural development. Current and Emerging Issues for Economic Analysis and Policy Research (CUREMIS II) – volume I: Latin America and the Caribbean. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/y4940e/y4940e00.htm#Contents>, accessed 13 January 2021).
- FAO (2012). Good practices in building innovative rural institutions to increase food security. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/a-i2258e.pdf>, accessed 14 January 2021).
- FAO (2014). The state of food and agriculture 2014: innovation in family farming. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/i4040e/i4040e.pdf>, accessed 5 May 2021).
- FAO (2015). Enhancing the potential of family farming for poverty reduction and food security through gender-sensitive rural advisory services. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/a-i5120e.pdf>, accessed 13 January 2021).
- FAO (2016a). New directions for inclusive pluralistic service systems: report of FAO expert consultation. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/a-i6103e.pdf>, accessed 13 January 2021).

- FAO (2016b). Local solutions to social protection: the role of rural organizations. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/a-i5740e.pdf>, accessed 11 January 2021).
- FAO (2017a). Pluralistic service systems market-oriented services for reducing rural poverty: conceptual framework. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/policy-support/tools-and-publications/resources-details/en/c/888896/>, accessed 22 December 2020).
- FAO (2017b). What role can agricultural extension and advisory services play in realizing gender equality and improved nutrition. Global Forum on Food Security and Nutrition: summary of the online discussion, no 141 from 19.06.2017 to 09.07.2017. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/a-i8164e.pdf>, accessed 22 December 2020).
- FAO (2017c). Towards inclusive pluralistic service systems: insights for innovative thinking. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/a-i6104e.pdf>, accessed 22 December 2020).
- FAO (2017d). The future of food and agriculture – trends and challenges. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/i6583e/i6583e.pdf>, accessed 22 December 2020).
- FAO (2018a). Revitalizing rural areas for youth (COAG/2018/06). Committee on Agriculture, Twenty-sixth session Rome, 1 - 5 October 2018. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/mx457en/mx457en.pdf>, accessed 11 January 2020).
- FAO (2018b). E-agriculture good practice: Digital Green's social behavior change communication model for extension. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/publications/card/en/c/I9182EN/>, accessed 11 January 2020).
- FAO (2018c). FAO elearning Academy: courses: understanding rural poverty. Poverty analysis lesson 2.4: sectoral development, infrastructure and inclusive markets [online course]. Rome: Food and Agriculture Organization of the United Nations (<https://elearning.fao.org/course/view.php?id=459>, accessed 11 January 2021).
- FAO (2019). FAO framework on rural extreme poverty: towards reaching target 1.1 of the Sustainable Development Goals. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/ca4811en/ca4811en.pdf>, accessed 20 July 2021).
- FAO (2020a). COVID-19 and rural poverty: supporting and protecting the rural poor in times of pandemic. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/reduce-rural-poverty/resources/resources-detail/en/c/1273387/>, accessed 13 January 2021).
- FAO (2020b). COVID-19 and the role of local food production in building more resilient local food systems. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/cb1020en/CB1020EN.pdf>, accessed 13 January 2021).
- FAO (2020c). Decent rural employment: working conditions [webpage]. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/rural-employment/work-areas/working-conditions/en/>, accessed 13 January 2021).
- FAO (2021). The State of Food and Agriculture 2021. Making agrifood systems more resilient to shocks and stresses. Rome: Food and Agriculture Organization of the United Nations (<https://www.fao.org/documents/card/en/c/cb4476en>, accessed 14 December 2021).
- FAO, IFAD, UNICEF, WFP & WHO (2020). The state of food security and nutrition in the world 2020: transforming food systems for affordable healthy diets. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/publications/sofi/2020/en/>, accessed 13 January 2021).
- FAO, IFAD, UNICEF, WFP & WHO (2021). The state of food security and nutrition in the world 2021: transforming food systems for food security, improved nutrition and affordable healthy diets for all. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/publications/sofi/2021/en/>, accessed 13 January 2021).
- FAO, IFAD & WFP (2021). Rural women and girls 25 years after Beijing: critical agents of positive change. Rome: (<http://www.fao.org/3/cb1638en/CB1638EN.pdf>, accessed 13 January 2021).
- Farnworth CR, Colverson KE (2015). Building a gender-transformative extension and advisory facilitation system in sub-Saharan Africa. *Journal of Gender, Agriculture and Food Security*. 1(1):20–39. <https://ageconsearch.umn.edu/record/246040>.
- Feng E, Cheng A (2020). With China's economy battered by pandemic, millions return to the land for work. Washington, DC: National Public Radio (NPR); 8 June 2020 (<https://www.npr.org/2020/06/08/868461563/with-chinas-economy-battered-by-pandemic-millions-return-to-the-land-for-work>, accessed 5 May 2021).
- Ferris S, Robbins P, Best R, Seville D, Buxton A, Shriver J et al. (2014). Linking smallholder farmers to markets and the implications for extension and advisory services. MEAS discussion paper series on good practices and best fit approaches in extension and advisory service provision, no. 4. Washington, DC: Modernizing Extension and Advisory Services (MEAS) Project (<https://agrilinks.org/sites/default/files/resource/files/MEAS%20Discussion%20Paper%204%20-%20Linking%20Farmers%20To%20Markets%20-%20May%202014.pdf>, accessed 5 May 2021).

- Fox L (2008). Beating the odds: sustaining inclusion in Mozambique's growing economy. Washington, DC: World Bank (<https://openknowledge.worldbank.org/handle/10986/6504>, accessed 5 May 2021).
- Freire G, Diaz-Bonilla C, Schwartz Orellana S, Soler Lopez J, Carbonari F (2018). Afro-descendants in Latin America: toward a framework of inclusion. Washington, DC: World Bank (<https://www.worldbank.org/en/region/lac/brief/afro-descendants-in-latin-america>, accessed 5 May 2021).
- Furceri D, Loungani P, Ostry JD, Pizzolo P (2021). The rise of inequality after pandemics: can fiscal support play a mitigating role? IMF working paper, WP/21/120: April 2021. Washington, DC: International Monetary Fund (<https://www.imf.org/en/Publications/WP/Issues/2021/04/30/The-Rise-in-Inequality-after-Pandemics-Can-Fiscal-Support-Play-a-Mitigating-Role-50287>, accessed 5 May 2021).
- Garenne M, Collinson MA, Kabudula CW, Gómez-Olivé FX, Kahn K, Tollman S (2016). Improving completeness of birth and death registration in rural Africa. *Lancet Glob Health*. 4(9):E604–5. [https://doi.org/10.1016/S2214-109X\(16\)30146-2](https://doi.org/10.1016/S2214-109X(16)30146-2).
- Gasmen AD (2019). Agriculture and Fisheries Extension Network: establishing partnerships to harmonize the pluralistic extension and advisory services in the Philippines. Best practice notes. Hyderabad: Asia-Pacific Islands Rural Advisory Services Network (APIRAS) (https://ati.da.gov.ph/ati-car/sites/default/files/AFEN_Establishing_Partnerships_to_Harmonize_the_Pluralistic_Extension_and_Advisory_Services_in_the_Philippines.pdf, accessed 10 January 2021).
- Georgieva K (2020). No lost generation: can poor countries avoid the Covid trap? [website]. London: The Guardian (<https://www.theguardian.com/business/2020/sep/29/covid-pandemic-imf-kristalina-georgieva>, accessed 5 May 2020).
- Ginsburg O, Badwe R, Boyle P, Derricks G, Dare A, Evans T et al. (2017). Changing global policy to deliver safe, equitable, and affordable care for women's cancers. *Lancet*. 389(10071):871–80. doi:10.1016/S0140-6736(16)31393-9.
- GIZ (2019). Identification of poor households [website]. Bonn: GIZ (<https://www.giz.de/en/worldwide/17300.html>, accessed 10 January 2021).
- Gomez CM, Fadel de Vasconcellos LC, Machado JMH (2018). A brief history of worker's health in Brazil's unified health system: progress and challenges. *Cien Saude Colet*. 23(6):1963–70. doi:10.1590/1413-81232018236.04922018.
- GOVPH (1991a). Local Government Code of 1991. Book I: general provisions. Manila: Department of Agrarian Reform, Republic of the Philippines (<http://lis.dar.gov.ph/documents/3294>, accessed 9 January 2021).
- Guterres A (2020). Tackling inequality: a new social contract for a new era. Nelson Mandela Annual Lecture 2020 [website]. New York, NY: United Nations (<https://www.un.org/en/coronavirus/tackling-inequality-new-social-contract-new-era>, accessed 5 May 2021).
- Gwary MM, Makinta AA, Wakawa RC (2019). Review on market re-orientation of extension services for value chain development in Borno State, Nigeria. *Journal of Agricultural Extension and Rural Development*. 11(10):162–8. doi:10.5897/JAERD2019.1073.
- Hamidi S, Sabori S, Ewing R (2020). Does density aggravate the COVID-19 pandemic? *Journal of the American Planning Association*. 86(4):495–509. <https://doi.org/10.1080/01944363.2020.1777891>.
- Havemann T, Negra C, Werneck F (2020). Blended finance for agriculture: exploring the constraints and possibilities of combining financial instruments for sustainable transitions. *Agric Hum Values*. 37:1281–92. <https://doi.org/10.1007/s10460-020-10131-8>.
- HelpAge International (2014). The ageing of rural populations: evidence on older farmers in low and middle-income countries. London: HelpAge International (<https://www.helpage.org/silo/files/the-ageing-of-rural-populations-evidence-on-older-farmers-in-low-and-middle-income-countries.pdf>, accessed 5 May 2021).
- Henning-Smith C (2020). The unique impact of COVID-19 on older adults in rural areas. *J Aging Soc Policy*. 32(4–5):396–402. doi:10.1080/08959420.2020.1770036.
- Hogenbirk JC, Robinson DR, Hill ME, Pong RW, Minore B, Adams K et al. (2015). The economic contribution of the Northern Ontario School of Medicine to communities participating in distributed medical education. *Can J Rural Med*. 20(1):25–32. PMID:25611911. <https://pubmed.ncbi.nlm.nih.gov/25611911/>.
- Houghton N, Bascolo E, Del Riego A (2020). Monitoring access barriers to health services in the Americas: a mapping of household surveys. *Rev Panam Salud Publica*. 44:e96. doi:10.26633/RPSP.2020.96.
- Hsu J (2020). Population density does not doom cities to pandemic dangers [website]. New York, NY: Scientific American (<https://www.scientificamerican.com/article/population-density-does-not-doom-cities-to-pandemic-dangers/>, accessed 5 May 2021).
- IEA, IRENA, UNSD, World Bank & WHO (2021). Tracking SDG 7: the energy progress report 2021. Washington, DC: World Bank (https://trackingsdg7.esmap.org/data/files/download-documents/2021_tracking_sdg7_report.pdf, accessed 21 July 2021).

- IFAD (2016a). Rural development report 2016: fostering inclusive rural transformation. Rome: International Fund for Agricultural Development (<https://www.ifad.org/en/web/knowledge/publication/asset/39240288>, accessed 5 May 2021).
- IFAD (2016b). Review of experience of the National Target Program for New Rural Development, Viet Nam. Policy case studies. Rome: International Fund for Agricultural Development (<https://www.ifad.org/documents/38714170/40253395/Policy+case+study+Viet+Nam+%E2%80%93+Review+of+experience+of+the+National+Target+Program+for+new+rural+development.pdf/bf68c25c-7489-4b06-b5ca-3095c9e4ab0f>, accessed 5 May 2021).
- IFAD (2018). Rural inequalities: evaluation approaches to overcome disparities. Conference publication. Rome: International Fund for Agricultural Development (<https://www.ifad.org/documents/36783902/40229762/booklet+final+SCREEN.PDF/bcdff3a3-776c-48c6-bff5-ee44469e3fe9>, accessed 5 May 2021).
- IFAD (2019a). Creating opportunities for rural youth: 2019 rural development report. Rome: International Fund for Agricultural Development (<https://www.ifad.org/en/web/knowledge/publication/asset/41173272>, accessed 5 May 2021).
- IFAD (2019b). Inclusive financial services for the poor. Rome: International Fund for Agricultural Development (https://www.ifad.org/documents/38714182/41183701/EvSynthesis_Overview_for_web2.pdf/5a779b97-10ab-b5cf-460b-43494d994d23, accessed 5 May 2021).
- IFAD (2020a). On International Day of Family Remittances, IFAD calls for remittance service providers to be declared essential businesses in times of crisis [website]. Rome: International Fund for Agricultural Development (<https://www.ifad.org/en/web/latest/news-detail/asset/41966677>, accessed 5 May 2021).
- IFAD (2020b). Remittances in crisis: response recovery resilience. Rome: International Fund for Agricultural Development, Remittance Community Task Force (https://143163-1013359-1-raikfcquaxqncofqfm.stackpathdns.com/wp-content/uploads/2020/12/Blueprint-for-Action_FINAL.pdf, accessed 5 May 2021).
- IFAD (2021a). Transforming food systems for rural prosperity. Rural Development Report 2021. Rome: International Fund for Agricultural Development (<https://www.ifad.org/documents/38714170/43704363/rdr2021.pdf/d3c85b6a-229a-c6f1-75e2-a67bb8b505b2?t=1633507142608>, accessed 13 December 2021).
- IFAD (2021a). Fifth global meeting of the Indigenous Peoples' Forum at IFAD. Synthesis of deliberations, 2, 3, 4 and 15 February 2021. Rome: International Fund for Agricultural Development (https://www.ifad.org/documents/38714174/42105832/synthesis_ipf2021_e.pdf/ea1c2bcf-beb0-f4a2-7414-294b3934df53, accessed 5 May 2021).
- ILO (1989). C169 - Indigenous and Tribal Peoples Convention, 1989 (no. 169) [website]. Geneva: International Labour Organization (https://www.ilo.org/dyn/normlex/en/f?p=NORMLEXPUB:12100:0::NO::P12100_INSTRUMENT_ID:312314, accessed 5 May 2021).
- ILO (1999). C182 - Worst Forms of Child Labour Convention, 1999 (no. 182). Geneva: International Labour Organization (https://www.ilo.org/dyn/normlex/en/f?p=NORMLEXPUB:12100:0::NO::P12100_ILO_CODE:C182, accessed 5 May 2021).
- ILO (2006). Integrating occupational health services into public health systems: a model developed with Thailand's primary care units. Informal economy, poverty and employment: Thailand series, number 2. Bangkok: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/asia/ro-bangkok/documents/publication/wcms_bk_pb_309_en.pdf, accessed 5 May 2021).
- ILO (2015). Global evidence on inequities in rural health protection, new data on rural deficits in health coverage for 174 countries. Extension of social security series no. 47. Geneva: International Labour Organization, Social Protection Department (<https://reliefweb.int/sites/reliefweb.int/files/resources/RessourcePDF.pdf>, accessed 5 May 2021).
- ILO (2017). Conclusions on improving employment and working conditions in health services. Tripartite meeting document TMIEWHS/2017/9. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/-ed_dialogue/-sector/documents/meetingdocument/wcms_553109.pdf, accessed 5 May 2021).
- ILO (2018a). Rural-urban labour statistics. 20th International Conference of Labour Statisticians Geneva, 10-19 October 2018. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/-dgreports/-stat/documents/meetingdocument/wcms_636038.pdf, accessed 5 May 2021).
- ILO (2018b). ILO global estimates on international migrant workers – results and methodology. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/-dgreports/-dcomm/documents/publication/wcms_436343.pdf, accessed 5 May 2021).
- ILO (2019a). Providing access to quality services in the rural economy to promote growth and social development: decent work in the rural economy, policy guidance notes. Geneva: International Labour Organization (http://www.ilo.org/global/topics/economic-and-social-development/rural-development/WCMS_437191/lang-en/index.htm, accessed 5 May 2021).

ILO (2019b). Developing the rural economy through financial inclusion: the role of access to finance. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---ed_dialogue/---sector/documents/publication/wcms_437194.pdf, accessed 5 May 2021).

ILO (2019c). Water for improved rural livelihoods: decent work in the rural economy, policy guidance notes. Geneva: International Labour Organization (https://www.ilo.org/global/topics/economic-and-social-development/rural-development/WCMS_729058/lang-en/index.htm, accessed 5 May 2021).

ILO (2019d). Decent work for food security and resilient rural livelihoods: decent work in the rural economy, policy guidance notes. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---ed_dialogue/---sector/documents/publication/wcms_437170.pdf, accessed 5 May 2021).

ILO (2019e). Implementing the ILO Indigenous and Tribal Peoples Convention No. 169: towards an inclusive, sustainable and just future. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms_735607.pdf, accessed 5 May 2021).

ILO (2019f). Promoting fair and effective labour migration policies in agriculture and rural areas. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---ed_dialogue/---sector/documents/publication/wcms_729409.pdf, accessed 5 May 2021).

ILO (2019g). The future of work in the health sector. Working paper: no. 325. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---ed_dialogue/---sector/documents/publication/wcms_669363.pdf, accessed 5 May 2021).

ILO (2020a). COVID-19 and the impact on agriculture and food security. ILO sectoral brief. Geneva: International Labour Organization (https://www.ilo.org/sector/Resources/publications/WCMS_742023/lang-en/index.htm, accessed 5 May 2021).

ILO (2020b). COVID-19 and the health sector. ILO sectoral brief. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---ed_dialogue/---sector/documents/briefingnote/wcms_741655.pdf, accessed 5 May 2021).

ILO (2020c). Quick guide on sources and uses of statistics on occupational safety and health. Geneva: International Labour Organization (https://ilo.org/wcmsp5/groups/public/---dgreports/---stat/documents/publication/wcms_759401.pdf, accessed 5 May 2021).

ILO (2020d). COVID-19 and child labour: a time of crisis, a time to act. Geneva: International Labour Organization (https://www.ilo.org/ipec/Informationresources/WCMS_747421/lang-en/index.htm, accessed 5 May 2021).

ILO (2020e). COVID-19 and the world of work: a focus on indigenous and tribal peoples. Policy brief: May 2020. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/publication/wcms_746893.pdf, accessed 5 May 2021).

ILO (2020f). Policy brief protecting migrant workers during the COVID-19 pandemic: recommendations for policy-makers and constituents. Geneva: International Labour Organization (https://www.ilo.org/global/topics/labour-migration/publications/WCMS_743268/lang-en/index.htm, accessed 5 May 2021).

ILO (2020g). Seasonal migrant workers' schemes: rethinking fundamental principles and mechanisms in light of COVID-19. Geneva: International Labour Organization (https://www.ilo.org/global/topics/labour-migration/publications/WCMS_745481/lang-en/index.htm, accessed 5 May 2021).

ILO (2021a). Inequalities and the world of work, report iv, international labour conference, 109th session, 2021. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---ed_norm/---relconf/documents/meetingdocument/wcms_792123.pdf, accessed 5 May 2021).

ILO (2021b). COVID-19 and its impact on working conditions in the meat processing sector. ILO sectoral briefs. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---ed_dialogue/---sector/documents/briefingnote/wcms_769864.pdf, accessed 5 May 2021).

ILO (2021c). ILO global estimates on international migrant workers – results and methodology – third edition. Geneva: International Labour Organization (https://www.ilo.org/global/topics/labour-migration/publications/WCMS_808935/lang-en/index.htm, accessed 5 May 2021).

ILO (2021d). World Social Protection Report 2020–22: Social protection at the crossroads in pursuit of a better future. Geneva: International Labour Office (https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms_817572.pdf, accessed 19 September 2021).

ILO & FAO (2021). Extending social protection to rural populations: perspectives for a common FAO and ILO approach. Geneva: International Labour Organization (<https://doi.org/10.4060/cb2332en>, accessed 5 May 2021).

ILO, FAO, IFAD & WHO (2020). Impact of COVID-19 on people's livelihoods, their health and our food systems. Joint statement by ILO, FAO, IFAD and WHO [webpage]. Geneva: International Labour Organization (https://www.ilo.org/global/about-the-ilo/newsroom/statements-and-speeches/WCMS_757974/lang-en/index.htm, accessed 5 May 2021).

- IOE & IFAD (2018). Rural inequalities, evaluating approaches to overcome disparities. International conference proceedings, Rome, 2 and 3 May 2018. Rome: Independent Office of Evaluation, International Fund for Agricultural Development (<https://www.ifad.org/documents/36783902/40280979/proceedings+CRI+screen.pdf/09decac7-3601-4970-bdf1-df0be937732b>, accessed 5 May 2021).
- IOM (2017). Migration: making the move from rural to urban by choice. Statement by UN Migration Director General William Lacy Swing on World Food Day, 16 October 2017 [website]. Geneva: International Organization for Migration (<https://www.iom.int/news/migration-making-move-rural-urban-choice>, accessed 5 May 2021).
- IOM (2010). Health of Migrants - The way forward: Report of a global consultation. Geneva: International Organization for Migration (<https://publications.iom.int/books/health-migrants-way-forward-report-global-consultation>, accessed 24 September 2021).
- IOM (2015). Evaluating Village Health Funding Mechanisms in Mawlamyinegyun Township. Geneva: International Organization for Migration (https://publications.iom.int/system/files/pdf/myanmar_study_in_health_funding.pdf, accessed 24 September 2021).
- IOM (2020). Annual Report 2020. Geneva: International Organization for Migration (<https://publications.iom.int/books/annual-report-2020>, accessed 24 September 2021).
- Inter-American Commission on Human Rights (2021). Situation of human rights in Brazil. Washington, DC: Inter-American Commission on Human Rights (<https://www.oas.org/en/iachr/reports/pdfs/Brasil2021-en.pdf>, accessed 5 May 2021).
- IPI (2017). Peace operations and prevention for sustaining peace: the restoration and extension of state authority. New York, NY: International Peace Institute (<https://www.ipinst.org/2017/03/peace-ops-for-sustaining-peace-state-authority>, accessed 5 May 2021).
- ITU (2020a). Facts and figures 2020; measuring digital development. Geneva: International Telecommunication Union (<https://www.itu.int/en/ITU-D/Statistics/Documents/facts/FactsFigures2020.pdf>, accessed 5 May 2021).
- ITU (2020b). Building smart villages: a blueprint - as piloted in Niger. Geneva: International Telecommunication Union (https://www.itu.int/dms_pub/itu-d/opb/str/D-STR-SMART_VILLAGE.NIGER-2020-PDF-E.pdf, accessed 10 January 2021).
- ITU (2021). Digital inclusion for all [webpage]. Geneva: International Telecommunication Union (<https://www.itu.int/en/mediacentre/backgrounders/Pages/digital-inclusion-of-all.aspx>, accessed 5 May 2021).
- IWGIA & ILO (2020). The impact of COVID-19 on indigenous communities: insights from the Indigenous Navigator. Copenhagen: International Work Group for Indigenous Affairs, International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---dgreports/---gender/documents/publication/wcms_757475.pdf, accessed 5 May 2021).
- Jensen J (2021). Sovereign debt vulnerabilities in developing economies: which countries are vulnerable and how much debt is at risk? New York, NY: United Nations Development Programme (<https://www.undp.org/publications/sovereign-debt-vulnerabilities-developing-economies>, accessed 29 July 2021).
- Kankeu HT, Ventelou B (2016). Socioeconomic inequalities in informal payments for health care: an assessment of the 'Robin Hood' hypothesis in 33 African countries. *Soc Sci Med.* 151:173–86. doi:10.1016/j.socscimed.2016.01.015.
- KNOMAD (2021). Migration and Development Brief 34. Resilience: COVID-19 Crisis Through a Migration Lens. Washington, D.C.: KNOMAD Secretariat, World Bank (<https://www.knomad.org/publication/migration-and-development-brief-34>, accessed 27 September 2021).
- Koller T (2019). Rural poverty and health services: challenges and gaps. Presentation at the Expert Meeting on Eradicating Rural Poverty to Implement the 2030 Agenda for Sustainable Development, Addis Ababa, 27 February to 1 March 2019. (https://www.un.org/development/desa/dspd/wp-content/uploads/sites/22/2019/03/WHO-Rural-Health_Kollert-Theadora-Swift_1March2019@06h00.pdf, accessed 7 May 2021).
- Learmontha D, Jansen van Vuurena A, De Abreu C (2015). The influence of gender roles and traditional healing on cervical screening adherence amongst women in a Cape Town peri-urban settlement. *South African Family Practice* 1(1):1–2. <http://dx.doi.org/10.1080/20786190.2014.978096>.
- Leupolt M (2008). Integrated rural development: key elements of an integrated rural development strategy. *Sociologia Ruralis.* 17:7–28. <https://doi.org/10.1111/j.1467-9523.1977.tb00849.x>.
- Liu Y, Li Y (2017). Revitalize the world's countryside. *Nature.* 548(7667):275–7. doi:10.1038/548275a.
- Liu N, Bao G, He AJ (2020). Does health insurance coverage reduce informal payments? Evidence from the "red envelopes" in China. *BMC Health Serv Res.* 20(1):95. doi:10.1186/s12913-020-4955-7.
- Lowder SK, Sánchez MV, Bertini R (2021). Which farms feed the world and has farmland become more concentrated? *World Development.* 142:105455. <https://doi.org/10.1016/j.worlddev.2021.105455>.

- Lusby C, Pinheiro T (2019). Case study: tourism in traditional Brazilian Quilombo communities – from theory into practice. *Journal of Global Business Insights*. 4(2):119–24. <https://www.doi.org/10.5038/2640-6489.4.2.1052>.
- Martin PL (2016). Migrant workers in commercial agriculture. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---ed_protect/--protrav/--migrant/documents/publication/wcms_538710.pdf, accessed 5 May 2021).
- Maxwell D, Mazurana D, Wagner M, Slater R (2017). *Livelihoods, conflict and recovery: findings from the Secure Livelihoods Research Consortium*. London: Secure Livelihoods Research Consortium (https://securelivelihoods.org/wp-content/uploads/Livelihoods-conflict-and-recovery_Findings-from-the-Secure-Livelihoods-Research-Consortium-1.pdf, accessed 5 May 2021).
- McDonald Y, Goldberg DW, Scarinci IC, Castle PE, Cuzick J, Robertson M et al. (2016). Health service accessibility and risk in cervical cancer prevention: comparing rural versus nonrural residence in New Mexico. *J Rural Health*. 33(4):382–92. doi:10.1111/jrh.12202.
- MEASURE Evaluation (2015). *Strengthening civil registration and vital statistics monitoring and evaluation systems*. Chapel Hill, NC: MEASURE Evaluation (https://www.measureevaluation.org/resources/publications/fs-14-112/at_download/document, accessed 7 May 2021).
- Mishra SV, Haque SM, Gayen A (2020). COVID-19 in India transmits from the urban to the rural. *International J Health Plann Manage*. 35(6). <https://doi.org/10.1002/hpm.3047>.
- Mitra B (2020). How will reverse migration affect agriculture and what can the government do? [website]. Ithaca, NY: Tata-Cornell Institute for Agriculture and Nutrition (<https://tci.cornell.edu/blog/how-will-reverse-migration-affect-agriculture-and-what-can-the-government-do/>, accessed 13 May 2021).
- Morrison J (n.d.). *Race and poverty in Latin America: addressing the development needs of African descendants* [website]. New York, NY: United Nations, UN Chronicle (<https://www.un.org/en/chronicle/article/race-and-poverty-latin-america-addressing-development-needs-african-descendants>, accessed 13 May 2021).
- OECD (2006). *Policy brief: reinventing rural policy*. Paris: Organisation for Economic Co-operation and Development (<https://www.oecd.org/regional/37556607.pdf>, accessed 13 May 2021).
- OECD (2010). *Strategies to improve rural service delivery*. OECD rural policy reviews. Paris: OECD Publishing (<https://doi.org/10.1787/9789264083967-en>, accessed 13 May 2021).
- OECD (2015). *Consequences of corruption at the sector level and implications for economic growth and development*. Paris: Organisation for Economic Co-operation and Development (https://read.oecd-ilibrary.org/governance/consequences-of-corruption-at-the-sector-level-and-implications-for-economic-growth-and-development_9789264230781-en#page17, accessed 13 May 2021).
- OECD (2016). *A new rural development paradigm in the 21st century: a toolkit for developing countries*. Paris: OECD Publishing, Development Centre Studies (<https://doi.org/10.1787/9789264252271-en>, accessed 13 May 2021).
- OECD (2017). *Agricultural policies in the Philippines*. OECD food and agricultural reviews. Paris: OECD Publishing (<https://doi.org/10.1787/9789264269088-en>, accessed 10 January 2021).
- OECD (2019). *Linking indigenous communities with regional development*. OECD rural policy reviews. Paris: OECD Publishing (<https://doi.org/10.1787/3203c082-en>, accessed 13 May 2021).
- OECD (2020a). *Policy implications of coronavirus crisis for rural development*. OECD policy responses to coronavirus (COVID-19). Paris: Organisation for Economic Co-operation and Development (<https://www.oecd.org/coronavirus/policy-responses/policy-implications-of-coronavirus-crisis-for-rural-development-6b9d189a/>, accessed 13 May 2021).
- OECD (2020b). *Rural well-being: geography of opportunities*. OECD rural studies. Paris: OECD Publishing (<https://doi.org/10.1787/d25cef80-en>, accessed 13 May 2021).
- OECD (2021). *Delivering quality education and health care to all: preparing regions for demographic change*. OECD rural studies. Paris: OECD Publishing (<https://doi.org/10.1787/83025c02-en>, accessed 13 May 2021).
- OECD/EC-JRC (2021). *Access and cost of education and health services: preparing regions for demographic change*. OECD rural studies. Paris: OECD Publishing (<https://doi.org/10.1787/4ab69cf3-en>, accessed 13 May 2021).
- OECD/UNCDF (2020). *Blended finance in the least developed countries: supporting a resilient COVID-19 recovery*. Paris: OECD Publishing (<https://doi.org/10.1787/57620d04-en>, accessed 7 May 2021).
- Ogunkola IO, Adebisi YA, Imo UF, Odey GO, Esu E, Lucero-Prisno 3rd DE (2020). Rural communities in Africa should not be forgotten in responses to COVID-19. *Int J Health Plann Manage*. 35(6):1302–5. doi:10.1002/hpm.3039.
- Ortiz I, Cummins M (2021). *Global austerity alert: looming budget cuts in 2021-25 and alternative pathways*. New York, NY: Initiative for Policy Dialogue (<https://policydialogue.org/files/publications/papers/Global-Austerity-Alert-Ortiz-Cummins-2021-final.pdf>, accessed 13 May 2021).

- Oxfam (2021). The inequality virus: bringing together a world torn apart by coronavirus through a fair, just and sustainable economy. Oxfam briefing paper January 2021. Oxford: Oxfam International (<https://oxfamilibrary.openrepository.com/bitstream/handle/10546/621149/bp-the-inequality-virus-250121-en.pdf>, accessed 13 May 2021).
- PAHO/WHO (2019). Strategy and plan of action on ethnicity and health 2019-2025. 57th Directing Council, CD57/13, Rev. 1, 3 October 2019. Washington, DC: Pan American Health Organization (https://iris.paho.org/bitstream/handle/10665.2/51744/PAHOEGC19002_eng.pdf?sequence=1&isAllowed=y, accessed 13 May 2021).
- Parisotto A, Elsheikhi A (2020). COVID-19, jobs and the future of work in the LDCs: a (disheartening) preliminary account. ILO working paper 20. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/--ed_emp/documents/publication/wcms_764268.pdf, accessed 7 August 2021).
- Pearson & UNESCO (2018a). Digital inclusion for low-skilled and low-literate people: a landscape review. Paris (<https://unesdoc.unesco.org/ark:/48223/pf0000261791>, accessed 13 May 2021).
- Pearson & UNESCO (2018b). Designing inclusive digital solutions and developing digital skills: guidelines. Paris (<https://unesdoc.unesco.org/ark:/48223/pf0000265537>, accessed 13 May 2021).
- Petrici H, Barale K, Kaaria SK, David S (2018). The Gender and Rural Advisory Services Assessment Tool. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/CA2693EN/ca2693en.pdf>, accessed 10 January 2021).
- Ponticello M, Mwanga-Amumpaire J, Tushemereirwe P, Nuwagaba G, King R, Sundararajan R (2020). "Everything is a mess": how COVID-19 is impacting engagement with HIV testing services in rural southwestern Uganda. *AIDS Behav.* 24(11):3006–9. doi: 10.1007/s10461-020-02935-w.
- Ponzetto G, Troiano U (2018). Social capital, government expenditures and growth. Working paper 24533. Cambridge, MA: National Bureau of Economic Research (https://www.nber.org/system/files/working_papers/w24533/w24533.pdf, accessed 13 May 2021).
- Rafiei M, Ezzatian R, Farshad A, Sokooti M, Tabibi R, Colosio C (2015). Occupational health services integrated in primary health care in Iran. *Annals of Global Health.* 81(4):561–7. <https://www.sciencedirect.com/science/article/pii/S2214999615012369>.
- Ranscombe P (2020). Rural areas at risk during COVID-19 pandemic. *Lancet Infect Dis.* 20(5):545. doi:10.1016/S1473-3099(20)30301-7.
- Rivera-Hernandez M, Ferdows NB, Kumar A (2020). The impact of the COVID-19 epidemic on older adults in rural and urban areas in Mexico. *J Gerontol B Psychol Sci Soc Sci.* gbaa227. doi:10.1093/geronb/gbaa227.
- Robinson-Pant A (2016). Learning knowledge and skills for agriculture to improve rural livelihoods. Paris: United Nations Educational, Scientific and Cultural Organization (https://ueaeprints.uea.ac.uk/id/eprint/61255/1/Full_report.pdf, accessed 19 July 2021).
- Rural England CIC (2020). Rural proofing for health toolkit. London: Rural England CIC (<https://ruralengland.org/rural-proofing-for-health-toolkit/>, accessed 13 May 2021).
- Rural Health Advocacy Project (2015). Rural proofing for health: guidelines – a guide to accounting for rural contexts in health policy, strategic planning and resourcing. Johannesburg: Rural Health Advocacy Project (<https://health-e.org.za/wp-content/uploads/2015/02/2015-01-13-RHAP-Rural-Proofing-Guideline-A4-Email-1.pdf>, accessed 13 May 2021).
- Samberg LH, Gerber JS, Ramankutty N, Herrero M, West PC (2016). Subnational distribution of average farm size and smallholder contributions to global food production. *Environmental Research Letters.* 11(12):124010. <https://doi.org/10.1088/1748-9326/11/12/124010>.
- Sax S, Angelo M (2020). 'We are invisible': Brazilian Cerrado quilombos fight for land and lives [website]. Menlo Park, CA: Mongabay (<https://news.mongabay.com/2020/04/we-are-invisible-brazilian-cerrado-quilombos-fight-for-land-and-lives/>, accessed 5 May 2021).
- Scheil-Adlung X (2016). Health workforce: a global supply chain approach. ESS working paper no 55. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/--ed_protect/--soc_sec/documents/publication/wcms_537419.pdf, accessed 5 May 2021).
- Siedner MJ (2020). Access to primary healthcare during lockdown measures for COVID-19 in rural South Africa: an interrupted time series analysis. *BMJ Open.* 10(10):e043763. doi:10.1136/bmjopen-2020-043763.
- Singh S (2020). Data on social and health vulnerability in rural India: a case of covid-19. *Data Brief.* 31:106020. doi:10.1016/j.dib.2020.106020.
- Stiglitz J (2020). Point of view: conquering the great divide. Washington, DC: International Monetary Fund, Finance & Development (<https://www.imf.org/external/pubs/ft/fandd/2020/09/pdf/COVID19-and-global-inequality-joseph-stiglitz.pdf>, accessed 5 May 2021).
- Stuckler D, Reeves A, Mckee M (2017). Social and economic multipliers: what they are and why they are important for health policy in Europe. *Scand J Public Health.* 45(18 Suppl):17–21. doi:10.1177/1403494817707124.

- Suthar AB, Khalifa A, Yin S, Wenz K, Ma Fat D, Mills SL et al. (2019). Evaluation of approaches to strengthen civil registration and vital statistics systems: a systematic review and synthesis of policies in 25 countries. *PLoS Med.* 16(9):e1002929. doi:10.1371/journal.pmed.1002929.
- Takeuchi RL, Mariotti C (2016). Who is being left behind in Latin America? An illustration in Brazil and Guatemala. London: Overseas Development Institute (<https://cdn.odi.org/media/documents/10282.pdf>, accessed 25 July 2021).
- Transparency International (2009). Corruption in the education sector. Working paper 4/2009. Berlin: Transparency International (https://images.transparencycdn.org/images/WP234_April_2009.pdf, accessed 5 May 2021).
- Transparency International (2018). Land corruption topic guide. Berlin: Transparency International (<https://knowledgehub.transparency.org/product/topic-guide-on-land-corruption>, accessed 5 May 2021).
- Trivelli C, Berdegue JA (2019). Rural transformation. Looking towards the future of Latin America and the Caribbean. 2030 – food, agriculture and rural development in Latin America and the Caribbean, no. 1. Santiago. Rome: Food and Agriculture Organization of the United Nations (<http://www.fao.org/3/ca5508en/ca5508en.pdf>, accessed 5 May 2012).
- Tomini S, Maarse H (2011). How do patient characteristics influence informal payments for inpatient and outpatient health care in Albania: results of logit and OLS models using Albanian LSMS 2005. *BMC Public Health.* 11:375. <https://doi.org/10.1186/1471-2458-11-375>.
- UNDESA (2018). The state of the world's indigenous peoples: indigenous people's access to health services. New York, NY: United Nations, Department of Economic and Social Affairs (<https://www.un.org/development/desa/indigenouspeoples/wp-content/uploads/sites/19/2018/03/The-State-of-The-Worlds-Indigenous-Peoples-WEB.pdf>, accessed 29 July 2021).
- UNDESA (2020a). Impact of COVID-19 on SDG progress: a statistical perspective. New York, NY: United Nations, Department of Economic and Social Affairs (https://www.un.org/development/desa/dpad/wp-content/uploads/sites/45/publication/PB_81.pdf, accessed 29 July 2021).
- UNDESA (2020b). World social report 2020: inequality in a rapidly changing world. New York, NY: United Nations, Department of Economic and Social Affairs (<https://www.un.org/development/desa/dspd/world-social-report/2020-2.html>, accessed 29 July 2021).
- UNDESA (2020c). 2020 voluntary national reviews synthesis report. New York, NY: United Nations, Department of Economic and Social Affairs (https://sustainabledevelopment.un.org/content/documents/27027VNR_Synthesis_Report_2020.pdf, accessed 7 May 2021).
- UNDESA (2021). Social protection in rural areas: achieving universal access for all. Policy brief 107. New York, NY: United Nations, Department of Economic and Social Affairs (https://www.un.org/development/desa/dpad/wp-content/uploads/sites/45/publication/PB_107.pdf, accessed 7 May 2021).
- UNDP (2019). Human development report 2019. Beyond income, beyond averages, beyond today: inequalities in human development in the 21st century. New York, NY: United Nations Development Programme (<http://hdr.undp.org/sites/default/files/hdr2019.pdf>, accessed 29 July 2021).
- UNDP (2020). Budgeting for the Sustainable Development Goals: aligning domestic budgets with the SDGs. New York, NY: United Nations Development Programme (https://sdgfinance.undp.org/sites/default/files/UNDP%20Budgeting%20for%20the%20SDGs%20-%20Guidebook_Nov%202020.pdf, accessed 29 July 2021).
- UNDP (2021). Project profile: accelerating progress towards the economic empowerment of rural women [website]. New York, NY: Multi-Partner Trust Fund, United Nations Development Programme (<http://mptf.undp.org/factsheet/fund/RWF00>, accessed 29 July 2021).
- UNDP & OPHI (2019). Illuminating inequalities: global multidimensional poverty index. Oxford: Oxford Poverty and Human Development Initiative (http://hdr.undp.org/sites/default/files/mpi_2019_publication_0.pdf, accessed 19 July 2021).
- UNDP & OPHI (2021). Global Multidimensional Poverty Index 2021 – Unmasking disparities by ethnicity, caste and gender. United Nations Development Programme and Oxford Poverty and Human Development Initiative (<https://ophi.org.uk/global-mpi-report-2021/>, accessed 11 December 2021).
- UNDP & UN Women (2021). COVID-19 Global Gender Response Tracker. Data Future Forum (online). New York, NY: United Nations Development Programme; United Nations Entity for Gender Equality and the Empowerment of Women (<https://data.undp.org/gendertacker/>, accessed 19 September 2021).
- UNECE (2017). Older persons in rural and remote areas. UNECE policy brief on ageing no. 18. Geneva: United Nations Economic Commission for Europe (https://www.unece.org/fileadmin/DAM/pau/age/Policy_briefs/ECE-WG1-25.pdf, accessed 19 July 2021).
- UNESCO (2015). Incheon declaration and framework for action for the implementation of the Sustainable Development Goal 4: ensure inclusive and equitable quality education and promote lifelong learning opportunities for all. Paris: United Nations Educational, Scientific and Cultural Organization (http://uis.unesco.org/sites/default/files/documents/education-2030-incheon-framework-for-action-implementation-of-sdg4-2016-en_2.pdf, accessed 19 July 2021).

- UNESCO (2020a). Global education monitoring report, 2020: inclusion and education: all means all. Paris: United Nations Educational, Scientific and Cultural Organization (<https://unesdoc.unesco.org/ark:/48223/pf0000373718>, accessed 19 July 2021).
- UNESCO (2020b). Why the world must urgently strengthen learning and protect finance for education. Paris: United Nations Educational, Scientific and Cultural Organization (<https://en.unesco.org/news/why-world-must-urgently-strengthen-learning-and-protect-finance-education>, accessed 19 July 2021).
- UNESCO (2021a). Glossary terms: rural areas [webpage]. Paris: United Nations Educational, Scientific and Cultural Organization (<http://uis.unesco.org/en/glossary-term/rural-area>, accessed 19 July 2021).
- UNESCO (2021b). Guidelines to strengthen the right to education in national frameworks. Paris: United Nations Educational, Scientific and Cultural Organization (<https://unesdoc.unesco.org/ark:/48223/pf0000375352>, accessed 19 July 2021).
- Unger-Saldana K, Infante-Castenda CB (2011). Breast cancer delay: a grounded model of help-seeking behavior. *Soc Sci Med.* 72(7):1096–104. <https://doi.org/10.1016/j.socscimed.2011.01.022>.
- UN-Habitat (2018). Guiding principles for urban-rural linkages to advance integrated territorial development. Expert Group Meeting in La Paz, Bolivia, 19-20 June 2018 summary report. Nairobi: United Nations Human Settlements Programme (https://unhabitat.org/sites/default/files/documents/2019-05/guiding_principles_for_urban-rural_linkages.pdf, accessed 19 July 2021).
- UN-Habitat (2019). Urban-rural linkages: guiding principles framework for action to advance integrated territorial development. Nairobi: United Nations Human Settlements Programme (<https://unhabitat.org/sites/default/files/2020/03/url-gp-1.pdf>, accessed 19 July 2021).
- UN-Habitat (2020). Infrastructure, technology and communication systems: Ethiopia – rural-urban transformation with the aid of road infrastructure in Hawassa. In: Compendium of case studies for the implementation of the urban-rural linkages: guiding principles (URL-GP) and framework for action, first edition. Nairobi: United Nations Human Settlements Programme (https://unhabitat.org/sites/default/files/2020/06/compendium-of-url-case-studies_web-vers_.pdf, accessed 27 July 2021).
- UNICEF & WHO (2019). Progress on household drinking water, sanitation and hygiene 2000–2017: special focus on inequalities. New York, NY: United Nations Children's Fund/World Health Organization (https://www.who.int/water_sanitation_health/publications/jmp-report-2019/en/, accessed 27 July 2021).
- UNICEF/WHO/World Bank (2021). UNICEF/WHO/WB Joint Child Malnutrition Estimates (JME) group released new data for 2021 [website]. Geneva: World Health Organization (<https://www.who.int/news/item/06-05-2021-the-unicef-who-wb-joint-child-malnutrition-estimates-group-released-new-data-for-2021>, accessed 27 July 2021).
- United Nations (2017a). Leaving no one behind: equality and non-discrimination at the heart of sustainable development: a shared United Nations System framework for action. New York, NY: United Nations, Chief Executives Board for Coordination (<https://digitallibrary.un.org/record/1628748?ln=en>, accessed 27 July 2021).
- United Nations (2017b). Presence, capacity and legitimacy: implementing extension of state authority mandates in peacekeeping. New York, NY: United Nations, Departments of Peacekeeping Operations and Field Support (<https://peacekeeping.un.org/en/presence-capacity-and-legitimacy-implementing-extension-of-state-authority-mandates-peacekeeping>, accessed 27 July 2021).
- United Nations (2019a). Disability and development report: realizing the Sustainable Development Goals by, for and with persons with disabilities, 2018. New York, NY: United Nations, Department of Economic and Social Affairs (<https://social.un.org/publications/UN-Flagship-Report-Disability-Final.pdf>, accessed 5 May 2021).
- United Nations (2019b). Chapter 2: corruption and the Sustainable Development Goals. In: World public sector report 2019. New York, NY: United Nations (<https://www.un-ilibrary.org/content/books/9789210041409c007/read>, accessed 5 May 2021).
- United Nations (2020a). COVID-19, inequalities and building back better. Policy brief by the HLCP Inequalities Task Team. New York, NY: United Nations (<https://unsceb.org/content/covid-19-inequalities-and-building-back-better>, accessed 5 May 2021).
- United Nations (2020b). A recommendation on the method to delineate cities, urban and rural areas for international statistical comparisons. Statistical Commission, 51st session, 3-6 March 2020. New York, NY: United Nations (<https://unstats.un.org/unsd/statcom/51st-session/documents/BG-Item3j-Recommendation-E.pdf>, accessed 5 May 2021).
- United Nations (2020c). Eradicating rural poverty to implement the 2030 Agenda for Sustainable Development: report of the Secretary-General. United Nations General Assembly document A/75/189. New York, NY: United Nations (<https://undocs.org/A/75/189>, accessed 29 July 2021).

- United Nations (2020d). Policy brief: the impact of COVID-19 on food security and nutrition, June 2020. New York, NY: United Nations (<https://unsdg.un.org/sites/default/files/2020-06/SG-Policy-Brief-on-COVID-Impact-on-Food-Security.pdf>, accessed 29 July 2021).
- United Nations (2020e). Report of the special rapporteur on the rights of indigenous peoples, José Francisco Calí Tzay (A/75/185). In: Seventy-fifth session of the United Nations General Assembly. New York, NY: United Nations General Assembly (<https://undocs.org/en/A/75/185>, accessed 22 July 2021).
- United Nations (2020f). The UN common position to address global corruption – towards UNGASS 2021. New York, NY: (https://ungass2021.unodc.org/uploads/ungass2021/documents/session1/contributions/UN_Common_Position_to_Address_Global_Corruption_Towards_UNGASS2021.pdf, accessed 29 July 2021).
- United Nations (2020g). The highest aspiration: a call to action on human rights, by António Guterres, United Nations Secretary-General on the occasion of the seventy-fifth anniversary of the United Nations. New York, NY: United Nations (https://www.un.org/sg/sites/www.un.org.sg/files/atoms/files/The_Highest_Aspiration_A_Call_To_Action_For_Human_Right_English.pdf, accessed 29 July 2021).
- United Nations (2021). World social report 2021. Reconsidering rural development. New York, NY: United Nations (<https://www.un.org/development/desa/dspd/world-social-report/2021-2.html>, accessed 19 July 2021).
- United Nations Human Rights Council (2014). Report of the Working Group of Experts on People of African Descent on its 14th session: addendum: mission to Brazil. Geneva: United Nations Human Rights Council (<https://digitallibrary.un.org/record/780612?ln=en>, accessed 22 July 2021).
- UNSDG (2019). Guidance for UN country teams on leaving no one behind (draft version for piloting). New York, NY: United Nations Sustainable Development Group (<https://unsdg.un.org/resources/leaving-no-one-behind-unsdg-operational-guide-un-country-teams-interim-draft>, accessed 19 July 2021).
- United Nations & World Bank (2018). Pathways for peace: inclusive approaches to preventing violent conflict. Washington, DC: World Bank (<https://www.pathwaysforpeace.org/>, accessed 19 July 2021).
- UN Women (2020a). IANWGE compendium on integrating gender considerations in the response to COVID-19: Key messages and actions from UN entities. New York, NY: The United Nations Entity for Gender Equality and the Empowerment of Women (<https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/ianwge-compendium-on-integrating-gender-considerations-in-the-response-to-covid-19-en.pdf?la=en&vs=5806>, accessed 19 July 2021).
- UN Women (2021). Beyond COVID-19: A Feminist Plan for Sustainability and Social Justice. New York, NY: The United Nations Entity for Gender Equality and the Empowerment of Women (<https://www.unwomen.org/en/digital-library/publications/2021/06/feminist-plan>, accessed 19 September 2021).
- UN Women & United Nations (2020). UN Secretary-General's policy brief: The impact of COVID-19 on women. New York, NY: United Nations Entity for Gender Equality and the Empowerment of Women; United Nations Secretariat (<https://www.unwomen.org/en/digital-library/publications/2020/04/policy-brief-the-impact-of-covid-19-on-women>, accessed 19 September 2021).
- UNSGSA (2021). Office of the United Nations Secretary-General's Special Advocate for Inclusive Finance for Development [website]. New York, NY: United Nations Development Programme (<https://www.unsgsa.org/office-of-the-unsgsa>, accessed 29 July 2021).
- Veldhuizen LR van, Rappoldt A, Bitzer V, Mur R (2018). Understanding agribusiness-based advisory services: findings of a learning trajectory. Amsterdam: KIT Royal Tropical Institute (<https://www.kit.nl/wp-content/uploads/2018/11/ABAS-synthesis-report-final.pdf>, accessed 9 January 2021).
- Verbist G, Förster MF, Vaalavuo M (2013). The impact of publicly provided services on the distribution of resources: review of new results and methods. OECD social, employment and migration working papers, no. 130. Paris: OECD Publishing (<http://dx.doi.org/10.1787/5k9h363c5szq-en>, accessed 9 January 2021).
- Vincent A, Balasubramani N (2020). Extension advisory services during COVID-19 – a case of DAESI input dealers from Karnataka state. MANAGE discussion paper 2. Hyderabad: MANAGE Centre for Climate Change and Adaptation (CCA), National Institute of Agricultural Extension Management (MANAGE) (<https://www.manage.gov.in/publications/discussion%20papers/MANAGE%20Discussion%20paper-Extension%20advisory%20services%20during%20COVID-19.pdf>, accessed 9 January 2021).
- Vu Thu T, Do Thu T, Nguyen TMH (2014). How to mobilize community involvement in Vietnam rural development: inspiration under the new community movement of Korea - Saemaul Undong. Hanoi: Global Research Capacity Building Programme, Korea International Cooperation Agency (<http://cantholib.org.vn:81/View.aspx?p=F65657C9E995862737E6D64667B9E9754537>, accessed 9 January 2021).
- Wang H, Zhang M, Li R, Zhong O, Johnstone H, Zhou H et al. (2021). Tracking the effects of COVID-19 in rural China over time. *Int J Equity Health*. 20:35. doi:10.1186/s12939-020-01369-z.

- Whiteley PF (2000). Economic growth and social capital. *Political Studies*. 48(3):443–66. doi:10.1111/1467-9248.00269.
- WONCA (2021). 17th World Rural Health Conference Declaration Bangladesh 2021: blueprint for rural health. WONCA Rural Health, The WONCA Working Party on Rural Practice (<https://ruralwonca.org/wp-content/uploads/17th-WHRC-Conference-Declaration-Blueprint-for-Rural-Health.pdf>, accessed 20 July 2021).
- WHO (2010). Increasing access to health workers in remote and rural areas through improved retention: global policy recommendations. Geneva: World Health Organization (http://whqlibdoc.who.int/publications/2010/9789241564014_eng.pdf, accessed 20 January 2021).
- WHO (2012). Water safety planning for small community water supplies: step-by-step risk management guidance for drinking-water supplies in small communities. Geneva: World Health Organization <https://apps.who.int/iris/handle/10665/75145>
- WHO (2015a). World report on ageing and health. Geneva: World Health Organization (<https://www.who.int/ageing/events/world-report-2015-launch/en/>, accessed 21 July 2021).
- WHO (2015b). Reducing stunting in children: equity considerations for achieving the global targets 2025. Geneva: World Health Organization (<https://www.who.int/publications/i/item/9789241513647>, accessed 21 July 2021).
- WHO (2015c). Health in All Policies: training manual. Geneva: World Health Organization (https://www.who.int/social_determinants/publications/9789241507981/en/, accessed 21 July 2021).
- WHO (2015d). Sanitation safety planning: manual for safe use and disposal of wastewater, greywater and excreta. Geneva: World Health Organization (<https://www.who.int/publications/i/item/9789241549240>, accessed 21 July 2021).
- WHO (2017a). Health employment and economic growth: an evidence base. Geneva: World Health Organization (http://www.who.int/hrh/resources/WHO-HLC-Report_web.pdf, accessed 21 July 2021).
- WHO (2017b). Guide to cancer early diagnosis. Geneva: World Health Organization (<https://apps.who.int/iris/bitstream/handle/10665/254500/9789241511940-eng.pdf?sequence=1&isAllowed=y>, accessed 21 July 2021).
- WHO (2018a). Household air pollution and health [online]. Geneva: World Health Organization (www.who.int/news-room/fact-sheets/detail/household-air-pollution-and-health, accessed 21 July 2021).
- WHO (2018b). Integrating a focus on anti-corruption, transparency and accountability in health systems assessments. Geneva: World Health Organization (<https://apps.who.int/iris/bitstream/handle/10665/310991/9789241515177-eng.pdf?ua=1>, accessed 21 July 2021).
- WHO (2018c). WHO guideline on health policy and system support to optimize community health worker programmes. Geneva: World Health Organization (<https://www.who.int/publications/i/item/9789241550369>, accessed 19 September 2021).
- WHO (2019). Handbook for conducting an adolescent health services barriers assessment (AHSBA) with a focus on disadvantaged adolescents: knowing which adolescents are being left behind on the path to universal health coverage, and why. Geneva: World Health Organization (<https://www.who.int/publications/i/item/9789241515078>, accessed 21 July 2021).
- WHO (2020). Plan for the decade of healthy ageing 2020–2030. Geneva: World Health Organization (https://cdn.who.int/media/docs/default-source/decade-of-healthy-ageing/final-decade-proposal/decade-proposal-final-apr2020-en.pdf?sfvrsn=b4b75ebc_25&download=true, accessed 21 July 2021).
- WHO (2021a). WHO Health Equity Monitor [online database]. Geneva: World Health Organization (<https://www.who.int/data/gho/health-equity>, accessed 13 May 2021).
- WHO (2021b). WHO guideline on health workforce development, attraction, recruitment and retention in rural and remote areas. Geneva: World Health Organization (<https://www.who.int/teams/health-workforce/health-workforce-development/>, accessed 21 July 2021).
- WHO (2021c). Pulse survey dashboard: tracking continuity of essential health services during the COVID-19 pandemic: round 2, January to March 2021 [online database]. Geneva: World Health Organization (<https://www.who.int/teams/integrated-health-services/monitoring-health-services/national-pulse-survey-on-continuity-of-essential-health-services-during-the-covid-19-pandemic/dashboard>, accessed 10 July 2021).
- WHO (2021d). Global report on ageism. Geneva: World Health Organization (<https://apps.who.int/iris/handle/10665/340208>, accessed 21 July 2021).
- WHO (2021e). Maternal, newborn, child and adolescent health and ageing: indicators: percentage of older people aged 60 or over living in rural and urban areas [online database]. Geneva: World Health Organization (<https://www.who.int/data/maternal-newborn-child-adolescent-ageing/indicator-explorer-new/mca/percentage-of-older-people-aged-60-or-over-living-in-rural-and-urban-areas>, accessed 10 July 2021).

WHO (2021f). Fact sheet for India – updated March 2021. Geneva: World Health Organization, International Agency for Research on Cancer (<https://gco.iarc.fr/today/data/factsheets/populations/356-india-fact-sheets.pdf>, accessed 21 July 2021).

WHO (2021g). Voice, agency, empowerment - handbook on social participation for universal health coverage. Geneva: World Health Organization (<https://www.uhc2030.org/what-we-do/voices/accountability/voice-agency-empowerment-handbook-on-social-participation-for-universal-health-coverage/>, accessed 21 July 2021).

WHO, IEA, GACC, UNDP, EnDev & World Bank (2018). Achieving universal access to clean and modern cooking fuels, technologies and services. Policy Brief 02, Accelerating SDG 7 Achievement. New York, USA, United Nations (<https://sustainabledevelopment.un.org/content/documents/17465PB2.pdf>, accessed 21 July 2021).

WHO, OECD, & World Bank (2018). Delivering quality health services: a global imperative for universal health coverage. Geneva: World Health Organization (<https://apps.who.int/iris/handle/10665/272465>, accessed 21 July 2021).

WHO Regional Office for Europe (2010). Rural poverty and health systems in the WHO European Region. Copenhagen: WHO Regional Office for Europe (https://www.euro.who.int/__data/assets/pdf_file/0019/130726/e94659.pdf, accessed 21 July 2021).

WHO Regional Office for Europe (2015). Review and reorientation of the Serbian national programme for early detection of cervical cancer towards greater health equity. Roma health – case study series no. 3. Copenhagen: WHO Regional Office for Europe (http://www.euro.who.int/__data/assets/pdf_file/0011/283646/WHO-Roma-Health-Case-Study_low_V7.pdf, accessed 21 July 2021).

WHO Regional Office for Europe (2020). Factsheet – financial protection and the sustainable development goals. Copenhagen: WHO Regional Office for Europe (https://www.euro.who.int/__data/assets/pdf_file/0003/465429/Financial-protection-and-SDGs-Factsheet-eng.pdf, accessed 21 July 2021).

WHO Regional Office for the Western Pacific (2021). Implementing telemedicine services during COVID-19: guiding principles and considerations for a stepwise approach. Manila: WHO Regional Office for the Western Pacific (<https://iris.wpro.who.int/bitstream/handle/10665.1/14651/WPR-DSE-2020-032-eng.pdf>, accessed 21 July 2021).

WHO & UNICEF (2017). Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines. Geneva: World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) (<https://apps.who.int/iris/handle/10665/258617>, accessed 21 July 2021).

WHO & UNICEF (2018). A vision for primary health care in the 21st century: towards universal health coverage and the Sustainable Development Goals. Geneva: World Health Organization (<https://apps.who.int/iris/handle/10665/328065>, accessed 21 July 2021).

WHO & UNICEF (2020a). Operational framework for primary health care: transforming vision into action. Geneva: World Health Organization (<https://www.who.int/publications/item/9789240017832>, accessed 21 July 2021).

WHO & UNICEF (2020b). Global progress report on WASH in health care facilities: fundamentals first. Geneva: World Health Organization (<https://www.who.int/publications/item/9789240017542>, accessed 21 July 2021).

WHO & UNICEF (2021). Progress on household drinking water, sanitation and hygiene 2000-2020: five years into the SDGs. Geneva: World Health Organization (<https://www.who.int/publications/item/progress-on-household-drinking-water-sanitation-and-hygiene-five-years-into-the-sdgs>, accessed 21 July 2021).

WHO & World Bank (2011). World report on disability 2011. Geneva: World Health Organization (<https://www.who.int/teams/noncommunicable-diseases/sensory-functions-disability-and-rehabilitation/world-report-on-disability>, accessed 21 July 2021).

WHO & World Bank (2019). Global monitoring report on financial protection in health 2019. Geneva: World Health Organization (https://www.who.int/healthinfo/universal_health_coverage/report/fp_gmr_2019.pdf?ua=1, accessed 21 July 2021).

World Bank (2018a). Women Business and the Law 2018. World Bank, Washington, DC: World Bank (<https://openknowledge.worldbank.org/handle/10986/29498>, accessed 21 July 2021).

World Bank (2018b). Poverty and shared prosperity 2018: piecing together the poverty puzzle. World Bank, Washington, DC: World Bank (<http://documents.worldbank.org/curated/en/104451542202552048/pdf/132029-REVISED-PUB-PUBLIC.pdf>, accessed 21 July 2021).

World Bank (2020). Poverty and shared prosperity 2020: reversals of fortune. Washington, DC: World Bank (<https://openknowledge.worldbank.org/bitstream/handle/10986/34496/9781464816024.pdf>, accessed 21 July 2021).

World Bank & WHO (2014). Global civil registration and vital statistics: scaling up investment plan 2015–2024. Washington, DC: World Bank (<https://www.worldbank.org/en/topic/health/publication/global-civil-registration-vital-statistics-scaling-up-investment>, accessed 21 July 2021).

