

Womankind response to IDC inquiry on the impact of coronavirus (COVID-19) on developing countries

About Womankind

Womankind Worldwide (Womankind) is a global women's rights organisation working in partnership with women's rights organisations and movements in Africa and Asia to transform the lives of women and girls. Our vision is of a just world where the rights of all women are respected, valued and realised. We support women's movements to strengthen and grow by providing a range of tools, including technical and financial support, communications, connectivity and shared learning, joint advocacy and fundraising.

1. Introduction

Womankind welcomes the opportunity to respond to the International Development Committee's (IDC) inquiry on the impact of coronavirus (COVID-19) on developing countries.

The impact of the coronavirus pandemic is gendered and reflects and exacerbates existing gender inequalities in society. Experience from the Ebola and Zika outbreaks shows that epidemics exacerbate existing inequalities, including those based on gender, age, disability, economic status, sexual orientation, amongst other factors.

By early April more than half of the world's population was under lockdown conditions, including increasing numbers of developing countries. Many countries' national responses only protect people who can afford to comply with them, neglecting large parts of the population, particularly women and girls, many of whom work in the informal sector who derive their livelihoods from daily earnings. In addition, measures taken have increased the risk of violence against women and girls, particularly but not exclusively domestic violence.

Our response to the inquiry begins with our rationale as to why the impact must be seen through an intersectional gender lens and must take a rights based approach. The rest of our response focuses on the following two areas within the scope of the inquiry, and considers implications on violence against women and girls (VAWG), women's economic rights, women's participation in decision-making and the role of women's rights organisations and movements:

- the direct and indirect impacts of the outbreak on developing countries, and specific risks and threats
- lessons identified and learned/applied from previous experience with infectious diseases

We would urge the Committee to take a broad definition of 'countries that are already struggling with humanitarian crises'. Even in developing countries not classified as having a humanitarian crisis before the COVID-19 outbreak, women and girls were already experiencing unacceptably high levels of inequality, discrimination, exclusion and human rights violations. These are now being exacerbated by the COVID-19 outbreak and national responses taken, which risk causing even more humanitarian crises around the world.

2. Summary of key points

- There is an immediate increased risk of VAWG in the context of COVID-19, with multiple countries around the world reporting an increase in cases of domestic violence against women and increased demand for emergency shelters. In addition, other forms of violence are increasing due to the measures taken to contain and mitigate the outbreak,

including state sanctioned violence against women, sexual exploitation and abuse, and child marriage. There are also reports of increasing violence against health care workers and online violence and abuse against women. These immediate increases in VAWG will have long-lasting and life changing effects on women, girls, communities and society.

- COVID-19 is already having a disproportionate economic impact on women in developing countries, affecting workers both in the formal and informal economy including the care economy. The social distancing measures, including the closure of schools and the closure of businesses where women are over-represented, are affecting women more disproportionately than men. The majority of women in developing countries work in the informal economy or at the lowest value chain of big businesses, such as horticulture, with no safety nets or social protection and no savings to turn to in case of loss of income. Therefore, women are finding themselves in situations where they are unable to afford basics such as food, soap and clean water, which are essential for daily survival. The closure of schools has also increased care duties for women, affecting their ability to continue doing the necessary paid work for their survival.
- Women's rights organisations in developing countries, and around the world, are leading efforts to ensure that national responses to COVID-19 are gendered and take an intersectional approach to account for the different needs and situations of diverse women and girls. They are also working closely with communities to understand need and ensure information is shared, and providing essential services, such as specialist VAWG services and support. Even before the crisis women's rights organisations were chronically underfunded and their work is now at even greater risk if they do not get the right support to continue to operate and adapt their often life-saving work.

3. Summary of recommendations

- **Governments and state actors should ensure strategies to deal with the COVID-19 outbreak take a rights-based approach and are based on robust intersectional gender analysis, taking into account the specific needs and situations of women and girls in specific contexts, and their roles in responding to the crisis.**
- **Measures taken by governments to contain and mitigate the outbreak must address the increased risk of VAWG, including domestic violence, and include additional funding in their national response plans. In particular they must:**
 - **Work with women's organisations to include safeguarding advice to women and girls at risk of VAWG in official guidance and communications;**
 - **Designate lifesaving VAWG services, including shelters and helplines, as essential services;**
 - **Ensure women's organisations providing these services can continue and adapt their services to the changing circumstances (for example, through more phone and online support);**
 - **Work with the security and justice sector to protect women and girls, ensure access to justice for survivors of violence and end impunity for perpetrators.**
- **Governments must develop and implement mitigation strategies that specifically target the economic impact of the outbreak on women:**

- **In the short term, increase or introduce food stamps and subsidies especially for women in the informal sector and others who have lost income and are likely not to have any savings. Bail out plans should prioritise small and medium businesses majority of which are owned by women and have no chance of survival without any support.**
 - **In the longer term, gendered responses to COVID-19 must address financial instability and women and girls' unpaid care work.**
- **Women's organisations and movements should be meaningfully involved in designing, developing and implementing national COVID-19 response plans. Decisions about these plans and resources must involve women, and embed gender expertise and considerations across the board. They should draw on the existing expertise and local knowledge of women's rights organisations.**
 - **Donors should provide core, flexible and long term funding to women's rights organisations to enable them to be resilient and build a safe remote working infrastructure to continue their critical work. This includes their work to support long term planning for recovery, as well as responding to immediate emergency issues, such as promotion of public information, domestic violence and legal aid.**
 - **Ensure the collection of data disaggregated by sex, age and disability (at the very least), including on infection, deaths, treatment, economic impacts, care burden, and incidences of violence against women and girls. This will support an understanding of the intersectional gendered impact of COVID-19 and enable responses to be gender sensitive and inclusive.**

4. The intersectional gendered impact of coronavirus (COVID-19)

The impact of the coronavirus pandemic is gendered and reflects and exacerbates existing gender inequalities in society. Whilst there are and will be specific challenges and impacts in relation to coronavirus in developing countries, these challenges and impacts must be seen through an intersectional gender lens as they will affect women and girls differently to men and boys, and affect different groups of women differently. Women and girls who face multiple and intersecting discriminations will face further marginalisation and exclusion as a result of the COVID-19 outbreak, including being at increased risk of violence and economic hardship. This includes women with disabilities, LBTQI+ women, women who work in the informal sector and women refugees.

Initial impacts of COVID-19 were seen in middle income and high income countries, however as the virus has spread these impacts are increasingly being seen in low income developing countries, many of which have weak health systems, weak rule of law, and existing high levels of inequality (gender, social, economic), and existing high levels of violence against women and girls. Many low income countries are home to existing humanitarian crises or emergency settings, however as an organisation working with women's rights organisations in Kenya, Ethiopia, Uganda, Zimbabwe and Nepal we are seeing these impacts across all the countries where we work.

As set out by our regional partner the **Strategic Initiative for Women in the Horn of Africa (SIHA) Network** on 19 March:

The latest global warnings and protection guidance regarding Coronavirus (COVID-19) has been, in our view, largely a conversation among the privileged. The risk

mitigation afforded by these prevention measures leaves out those who do not have access or only have limited access to 1) information 2) sanitizers/disinfectants, and 3) soap and clean water. These global proclamations further show a callous indifference to the fact that much of the world's population lives in a state of precarity which does not permit them to continue to access food and an income in the event of widespread public shutdown. Meaning that if complementary measures are not taken, the implementation of social distancing would destroy the livelihoods of urban slum communities across the Greater Horn of Africa region.

Under no circumstances should urban poor communities be subject to further marginalization through measures which stigmatize and harm them, such as forced community-wide quarantines which cut people off from access to food, water, medicines and other basic necessities.¹

SIHA go on to express their concerns for women street vendors, domestic workers, alcohol brewers and all other women in the invisible informal economy. The livelihoods of hundreds of women and girls are inseparable from their presence among crowds and congested areas. If these women do not go to work or if their customers disappear the survival of these women and their families will be at serious risk.

Our partners represent women in all their diversity, however many of our partners tell us that many women are being left behind in national responses to COVID-19. The **Feminist Dalit Organisation (FEDO)** in Nepal has described how Dalit women are unable to access the limited relief that is available, not receiving information or being involved in awareness raising activities. **Women for Human Rights Single Women Group (WHR)** has reported how widows and single women heads of households have not been adequately included in relief efforts to date. The **National Union of Women with Disabilities of Uganda (NUWODU)** and Deaf Women Included in Zimbabwe report that women with disabilities have varied needs that are not being considered including the lack of provision of Public Service Announcements in accessible formats and unequal access to quality and standard of health care as provided to other persons. In addition, **Polycom** in Kenya report unequal access and response for women and adolescent girls in the Kibera slums.²

Recommendation: Governments and state actors should ensure strategies to deal with the COVID-19 outbreak take a rights-based approach and are based on robust intersectional gender analysis, taking into account the specific needs and situations of women and girls in specific contexts, and their roles in responding to the crisis.

5. Violence against women and girls

Violence against women girls (VAWG) is one of the most widespread human rights violations. 1 in 3 women worldwide experience violence in their lifetime.³ Globally, the killing of women by intimate partners or family members is rising.⁴ Levels of intimate partner violence are already unacceptably high during and after conflict and crises. Research carried out by the VAWG Helpdesk on the emerging evidence of the impact of COVID-19 on violence against women and girls highlighted an increased risk of multiple forms of violence, including but not exclusively domestic violence.⁵

¹ <https://sihanet.org/coronavirus-dos-and-donts-are-blind-to-urban-poor-womens-realities/>

² <https://www.fastcompany.com/90483973/what-will-coronavirus-do-to-one-of-africas-largest-slums>

³ World Health Organisation Department of Reproductive Health and Research, London School of Hygiene and Tropical Medicine, South African Medical Research Council. Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence. 2013.

⁴ <https://www.unodc.org/documents/data-and-analysis/gsh/Booklet1.pdf>

Rise in domestic violence

Women and human rights organisations and activists have reported an increase in domestic violence against women in multiple countries following the introduction of measures to contain and mitigate the COVID-19 outbreak, including self-isolation, social distancing, quarantine and lockdown measures, when women are confined with their abusers for long periods of time and without access to the support they vitally need.

Whilst the early evidence focused on high and middle income countries where the outbreak first took hold, such as China, Italy, Spain, the UK and the US,⁶ increased reports of domestic violence are also now being seen in low income countries. For example, Womankind partner **Musasa** has reported a significant increase in the number of gender-based violence (GBV) cases reported to it during the lockdown, many of which are cases of domestic violence against women, and Womankind partner the **Association for Women's Sanctuary and Development (AWSAD)** in Ethiopia have opened an emergency shelter to meet growing demand (see further information below).

The UN have called this rise in violence against women and girls the 'shadow pandemic' and called for urgent action by all government, UN agencies, civil society and other actors:

*"The Secretary-General has called for all governments to make the prevention and redress of violence against women a key part of their national response plans for COVID-19. Shelters and helplines for women must be considered an essential service for every country with specific funding and broad efforts made to increase awareness about their availability. Grassroots and women's organizations and communities have played a critical role in preventing and responding to previous crises and need to be supported strongly in their current frontline role including with funding that remains in the longer-term."*⁷

Recommendation: Measures taken by governments to contain and mitigate the outbreak must address the increased risk of VAWG, including domestic violence, and include additional funding in their national response plans. Governments must work with women's organisations to include safeguarding advice to women and girls at risk of VAWG in official guidance and communications.

Increased demand for specialist VAWG services, including shelters and helplines

Around the world domestic abuse helplines have seen a surge in demand and there has been an increase in demand for emergency shelters. Womankind is particularly concerned about the availability, accessibility and continuation of specialist life-saving VAWG services at this critical time, particularly shelters run by women's organisations for women survivors of violence. Good quality shelters, such as those provided by Womankind partners **Musasa** in Zimbabwe, **AWSAD** in Ethiopia and **WHR** in Nepal, provide critical holistic services such as safe accommodation, healthcare including sexual reproductive health and rights (SRHR), counselling, skills employment training, and facilitate access to the police and justice system.

COVID-19 is and will continue to have a significant impact on public and other services and past global pandemics and crises have shown that women suffer disproportionately from a redirection, reduction or interruption of such services. There are examples in multiple

⁵ <http://www.sddirect.org.uk/media/1881/vawg-helpdesk-284-covid-19-and-vawg.pdf>

⁶ <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/issue-brief-covid-19-and-ending-violence-against-women-and-girls-en.pdf?la=en&vs=5006>

⁷ <https://www.unwomen.org/en/news/stories/2020/4/statement-ed-phumzile-violence-against-women-during-pandemic>

countries of women's shelters being redirected for alternative use. In China many shelters were turned into homeless shelters and in Nepal the Government is using shelters run by our partner WHR for quarantine and isolation in 10 districts and is also using their head office in Kathmandu, giving them 365 beds. As public resources become even more stretched and countries go and have gone into lockdown, women's organisations are finding it increasingly hard to offer these vital services. Whilst services will be extremely strained it is essential that shelters and SRHR services, such as the clinical management of rape and psycho-social support, can continue to support women survivors of violence.

Example of Womankind partners and other women's organisations providing life-saving VAWG services in Zimbabwe

Womankind partner **Musasa** provides specialist VAWG services to women survivors of violence in Zimbabwe. Musasa provides free 24 hour support (via phone, Whatsapp and SMS), access to medical treatment and temporary safe shelters to survivors.

Following the lockdown in Zimbabwe demand for its services have surged. During the first 11 days of the lockdown Musasa received 764 responses of GBV. Musasa Project Director Precious Taru said "This is a spike in terms of GBV cases reported. In a month, Musasa normally records 500 to 600 cases. But so far we have recorded more numbers in a short space of 11 days than we normally do in a month."⁸

Musasa are working with other women's organisations offering specialist VAWG services, including the Legal Resources Foundation offering legal advice, Womankind partner the **Zimbabwe Women's Lawyers Association (ZWLA)** who are offering legal services including representation, and the Adult Rape Clinic offering clinical services, including the clinical management of rape to survivors of sexual violence.

Womankind partner **ZWLA** is also meeting additional demand from women survivors of violence seeking legal advice. It has adapted its services to provide free legal advices online, via email and over the phone, following the suspension of helpdesk services (where women came, for example, to a magistrates court to get legal advice). ZWLA and other women's organisations are also offering legal advice on other human rights issues, such as inheritance and property rights.

Example of women's organisations working together to provide shelters to women survivors of violence in Ethiopia

In April 2020 the Ethiopia Network of Women's Shelters (ENWS), a network established in 2016 by eight civil society organisations and one governmental organisation providing shelter, medical, psychological, legal and other essential services to women and girls survivors of violence in Ethiopia, has opened an emergency shelter for those facing and fleeing violence. Womankind partner AWSAD is leading work in the network, coordinating efforts with members to provide shelter during the pandemic.

Recommendation: Governments must designate lifesaving VAWG services, including shelters and helplines, as essential services, and ensure women's organisations providing these services can continue and adapt their services to the changing circumstances (for example, through more phone and online support).

⁸ <https://www.herald.co.zw/lockdown-with-your-abuser-over-700-gbv-in-11-days/>

Rise in other forms of violence

Other forms of violence against women and girls are also heightened during crises and other similar outbreaks. For example, the 2014 Ebola outbreak in West Africa reduced women's financial independence and had negative economic impacts on women, placing them at greater risk of sexual exploitation and abuse.⁹ Other forms of violence that are at increased risk during the COVID-19 outbreak include state sanctioned violence, child marriage, violence against healthcare workers and online violence and abuse against women.¹⁰

Womankind has received reports from our partners in Uganda, Zimbabwe and Kenya about violence against women by law enforcement officers and other state and community officials as they enforce social distancing measures (see examples below). This use of excessive force by security forces is common in these contexts at times of crisis and women often experience high levels of violence at the hands of state officials, including arbitrary detentions, with perpetrators acting with impunity.

Example of state sanctioned violence in Uganda and Zimbabwe

In **Uganda** on 26th March 2020, a group of women street vendors who had been selling food items were attacked and beaten by law enforcement officials, police officers and Local Defense Units. The attack took place not long after President Museveni's directive, which prohibits the sale of non-food items in markets. The conduct of the law enforcement officers is a blatant violation of the human rights obligations that the Ugandan Government has agreed to protect.¹¹

In **Zimbabwe** our partner the **Women's Coalition of Zimbabwe** has reported that women have been 'beaten and barred by law enforcement agents, from accessing water at communal boreholes, particularly in Masvingo, Aphiri area.'

In South Sudan, staff from our partner the **SIHA Network** have reported that 'more families are forcing their girl children into arranged marriages out of desperation for the bride price. This is a worrying trend that is typical of such economic hard times.'¹² There have also been reports of child marriage in Zimbabwe during the lockdown.¹³

Recommendation: Governments must work with the security and justice sector to protect women and girls, ensure access to justice for survivors of violence and end impunity for perpetrators.

⁹ https://reliefweb.int/sites/reliefweb.int/files/resources/2016-02-05_Final_Report_Global_Response_to_Health_Crises.pdf

¹⁰ For further information on these other forms of violence during the COVID-19 outbreak and other pandemics see <http://www.sddirect.org.uk/media/1881/vawg-helpdesk-284-covid-19-and-vawg.pdf> and <https://www.cgdev.org/sites/default/files/pandemics-and-vawg-april2.pdf>

¹¹ <https://sihanet.org/statement-of-solidarity-we-demand-accountability-for-the-brutality-by-ugandan-law-enforcement-agents/>

¹² https://issuu.com/halayassin/docs/final_-_siha_quarterly_newsletter_april_2020

¹³ <https://www.herald.co.zw/lockdown-with-your-abuser-over-700-gbv-in-11-days/>

6. Women's economic rights

The COVID-19 crisis feeds on multiple crises and failure of the current economic model that is characterised by huge levels of inequalities between countries and between people. In addition, it is a model that undervalues the contributions made majorly by women through unpaid and domestic work, undermining the role of the State in providing public services and values profits over human security.

Global inequalities between the global north and south means that countries in the global south continue to lose resources through various channels, including illicit financial flows, tax abuse, debt servicing and unfair trade policies. For example, conservatively, Africa loses more 50 billion USD annually through illicit financial flows. These revenues lost could have been used to strengthen public health care systems and other social services and preparedness, in the light of learning from other epidemics in recent years.

Recommendation: Governments must develop and implement mitigation strategies that specifically target the economic impact of the outbreak on women.

Women's Income

In times of COVID-19 pandemic women's employment and ability to have an income is more at risk. Sectors where women are over represented are being hit hardest by social distancing measures. These include hospitality jobs such as in restaurants, flights, beauty salons, horticulture, domestic workers, sex workers, open air markets etc. In addition, women working in the informal sector that is not defined as essential services currently will lose their income since they lack protection and safety nets.

In developing countries many women work in the informal sector which presents specific challenges in dealing with the pandemic. For example, in Uganda 80% of the Ugandan labour force is employed in the informal economy, of which over 75% are women. Many of these women informal labourers, who are often the primary providers for their households, live and work in conditions that are characterized by over-crowding and limited to no basic water and sanitation facilities.¹⁴ For these women social-distancing measures and regular hand-washing are almost impossible.

Women are also over represented in temporary employment and therefore are being laid off first and are not likely to be rehired in post COVID-19 recovery as companies will be trying to cut down costs and recover from the crisis. Many developing countries lack key services that would support and protect people in these categories. In particular, a lack of social protection systems and provision of accessible and gender responsive public services leave women more vulnerable. Any response mechanisms need to consider short and long term measures that especially are beneficial to vulnerable women.

Recommendation: In the short-term governments must increase or introduce food stamps and subsidies especially for women in the informal sector and others who have lost income and are likely not to have any savings. Bail out plans should prioritise small and medium businesses, the majority of which are owned by women and have no chance of survival without any support.

Unpaid care

Due to existing gender inequalities, women are socially obliged to take on the bulk of household work, source food, fuel and water, care for children, the sick and the elderly.

¹⁴ <https://sihanet.org/coronavirus-uganda-needs-a-robust-response-plan-to-support-women-in-the-informal-economy/>

Women already perform a disproportionate amount of domestic and care work estimated at 76 percent of all unpaid and domestic work that is three times more than the work performed by men. These burdens multiply further during emergencies.

Many developing countries in Africa and Asia have put in place social distancing measures including closure of schools and childcare facilities, urging or requiring people to work from home and announcing that the elderly are at a greater risk. Women's ability to engage in paid work faces extra barriers. Globally women continue to be paid 16 per cent less than men on average, and the pay gap rises to 35 percent in some countries.

In times of crisis like this, women often face the unfair and sometimes impossible choice of giving up paid work to care for children, elderly, the sick or people with disabilities at home. This is even worse for single mothers and female headed households who must remain the only breadwinner and yet carry out an increasing amount of unpaid and domestic work. In many developing countries neighbours and family members, particularly grandmothers, step to support with child care. With social distancing this is no longer an option.

Recommendation: In the longer term, gendered responses to COVID-19 must address financial instability and women and girls' unpaid care work.

7. Women's participation and decision making, and the critical role of rights organisations and movements

Women do not have full and effective participation at any level of decision-making, including in making decisions related to how to contain and mitigate the COVID-19 outbreak. To ensure responses are gendered they must be meaningfully involved in decision-making.

Women's rights organisations and movements play a critical role in preventing and responding to crises, providing essential services and critical information, holding their governments to account including advocating for them to develop and implement gender-inclusive measures. However, current response plans and measures are largely gender blind and are not routinely involving women's rights organisations as experts or partners. For example, the tax bill intended to provide relief to the population in times of crisis neglects people working in the informal sector, the majority of which are women.

Women's rights organisations and movements are finding it difficult to play their monitoring and oversight roles effectively during this emergency as they struggle to continue their operations remotely and adapt their services. Even before the crisis women's rights organisations were working in difficult conditions with limited funding, particularly core, flexible and long-term funding, to enable them adapt to difficult situations quickly such as is needed now. Only 1 percent of gender equality funds go to women's rights organisations.

Recommendations:

- **Women's organisations and movements should be meaningfully involved in designing, developing and implementing national COVID-19 response plans. Decisions about these plans and resources must involve women, and embed gender expertise and considerations across the board. They should draw on the existing expertise and local knowledge of women's rights organisations.**
- **Donors should provide core, flexible and long term funding to women's rights organisations to enable them to be resilient and build a safe remote working infrastructure to continue their critical work. This includes their work to support long term planning for recovery, as well as responding to immediate emergency issues, such as promotion of public information, domestic violence and legal aid.**