

Guidance Note 1: How are women affected?

Series on Preventing Violence against Women During the COVID-19 Pandemic

This Guidance Note summarizes several core dimensions affecting women's safety and basic rights during COVID-19, in the hope of galvanizing attention for VAW mitigation and prevention.

The burden of COVID-19 will be most acutely experienced by women, as violence against women (VAW) as well as gender and other inequalities are magnified during times of crisis. During lockdown and confinement, the stark reality that home is not a safe place for many women around the world—coupled with reduced access to support networks and services—can have dire consequences.

Increase in intimate partner violence (IPV) against women: Overall rates of IPV are increasing during the COVID-19 pandemic, and reputable sources have already noted a surge in women under quarantine reporting violence from their partners.¹ As more and more governments issue lockdown (or similar) orders, women and their children risk being trapped with abusive partners/fathers and isolated from their support networks—and at the same time, known triggers for violence are increasing (e.g., financial hardships, men's alcohol abuse, crowded living conditions, emotional stress, etc.). Men who use violence may also take advantage of social distancing and self-isolation policies to further control and coerce their partners.

Increase in non-partner violence against women: While IPV remains the most prevalent form of violence that women experience globally (during emergencies/crisis and stability), the COVID-19 pandemic also increases the risk of non-partner violence for women and girls.² As communities practice social distancing and remain indoors, streets and other public places may be empty, exposing women to greater risk of physical and sexual violence by strangers. For example, during the Ebola pandemic in West Africa, women and girls were at higher risk of sexual exploitation and abuse.³

Overwhelming care work and domestic responsibilities: Rigid, unequal gender norms place a disproportionate burden of care work and domestic responsibilities on women. This workload is exacerbated during COVID-19, as workplaces, schools and places of worship close, family members spend more time at home, and sick family members require extensive care—primarily provided by women.⁴ The intensification of these domestic responsibilities not only exposes women to the virus, but can also jeopardize their emotional and physical health and wellbeing. In addition, women make up the vast majority of healthcare workers around the world. During a pandemic this results in long hours, personal health risks (particularly when adequate personal protective equipment is not available) and risk of increased workplace violence.⁵ Women providing direct services may also experience secondary trauma and burnout.

Inability to access services: Women experiencing violence may be unable to access life-saving care and support services during COVID-19, given the potential for: health centers to become overburdened, shelters to close or be unable to take in additional survivors, case management services to be suspended, police protection units to be de-prioritized/understaffed, and overall resources to be diverted towards the COVID-19 response. Even where services are available, mobility restrictions under lockdown—or financial and logistical constraints (e.g., inability to leave children alone at home)—may pose important barriers. In addition to challenges in accessing VAW specific support, women may experience interrupted access to other essential health services such as safe delivery, antenatal/postnatal visits, clinical management post rape, treatment of STIs, availability of contraception, etc.⁶



Economic hardship and food insecurity: Globally women are significantly over-represented in informal sector employment, livelihoods that are insecure and highly prone to disruption during health emergencies.⁷ In addition, the need to care for children and sick family members during COVID-19 most frequently impacts women, jeopardizing their employment across sectors. It is also relevant that predominant patriarchal norms and gender role expectations mean that many women are financially dependent on their partners and/or subjected to economic abuse, whereby they are unable to maintain control and decision-making over their own income. This lack of financial autonomy compromises women's rights and their ability to provide essential needs for the family, even under stable circumstances. Risks of food shortages are exacerbated during COVID-19 as violence against women escalates, women are unable to earn wages in the informal sector, workers are laid off, and families that are dependent on daily wages are unable to “stock up” in preparation for lockdown requirements.

Risk to children's safety and wellbeing: The issues described above profoundly influence women's own safety and wellbeing, as well as their ability to provide (physically, emotionally and financially) for their children. For example, many women in abusive relationships prevent their children from witnessing the violence used against them by sending children outside or to stay with relatives/friends—protective mechanisms that may be unavailable when stay at home directives are in place. In addition, as the primary caretaker in the majority of families, women's heightened levels of stress and anxiety can extend to their children, and may make it difficult for women to meet their children's practical and emotional needs. The COVID-19 pandemic can also have severe impacts on children directly—including increased risk of abuse, neglect, exploitation and violence,⁸ as well as the potential trauma (or fear) of losing loved ones to COVID-19.



As a community of feminists and activists, this is a moment that calls for compassion, solidarity and positive action. Being informed and observant—and staying flexible as new dynamics and realities emerge—is the first critical step for our collective response. We draw attention to these potential impacts on women not to despair, but rather to focus our energies on supporting women's strength and resilience—defining attributes which have withstood the test of time and are indispensable for navigating this current crisis. Together we can emerge stronger.

Suggested Citation: Raising Voices (2020) *Guidance Note 1: How are women affected?* Series on Preventing Violence against Women during the COVID-19 Pandemic. Kampala, Uganda.

Endnotes

- 1 UN Women COVID-19 and ending violence against women and girls (2020)
- 2 Peterman et al. Pandemics and Violence Against Women and Children (2020)
- 3 Care International Gender Analysis: Prevention and Response to Ebola Virus Disease in the DRC (2020)
- 4 Gender in Humanitarian Action The COVID-19 Outbreak and Gender: Key Advocacy Points from Asia and the Pacific (2020)
- 5 GBV AoR Helpdesk Securing the Safety and Wellbeing of Women Frontline Healthcare Workers in the COVID-19 Response (2020)
- 6 WHO COVID-19 and violence against women: What the health sector/system can do (2020)
- 7 UN Women Paying attention to women's needs and leadership will strengthen COVID-19 response (2020)
- 8 UNICEF COVID-19: Children at heightened risk of abuse, neglect, exploitation and violence amidst intensifying containment measures (2020)