

FINDING HOPE: Experiences of women, children and adolescents during the COVID-19 pandemic in their own words



Overview

The multifaceted implications of the COVID-19 pandemic on the well-being of women and adolescents are increasingly reported. However, as the COVID-19 pandemic continues to evolve, we need to better understand the lived realities of women and adolescents. What are the main challenges? How are they coping with COVID-19-related restrictions? What information is coming from communities on actions needed in the short and long terms? We need to allow the people behind the numbers and statistics to speak for themselves.

This advocacy brief illustrates the lived experiences of women and adolescents from April to August 2020, many of which occurred during countries' initial attempts to curb the transmission of COVID-19, including lockdown measures. It also documents solutions being implemented and puts forward policy asks to help shape national, regional and global responses to the challenges faced by women and adolescents during and beyond the COVID-19 pandemic.

This brief is based on the analytical work of five in-country organizations – Amref Health Africa; the Centre for Catalyzing Change (C3); the Graça Machel Trust; International Planned Parenthood Federation Western Hemisphere Region (IPPFWHR); and Profamilia (Colombia) – as well as the Pan American Health Organization (PAHO/WHO) and UNICEF (Latin America and the Caribbean). Using various methods, these organizations collected and reported on the lived experiences of over 30,000 people in 43 countries, the majority who were women and adolescents. While there have been many changes since the period of this analysis, the findings remain highly relevant, particularly as many countries are experiencing another increase in the number of infections.

Lived experiences: key findings

This analysis shows that women and adolescents are bearing a disproportionate burden during this crisis. The challenges they reported span: impact on mental health and well-being due to disruption of life; limits on access to education; food insecurity; loss of livelihoods; lack of access to health information and services; limitations on sexual and reproductive health and rights; and increased violence, lack of safety and reduced agency.

Movement restrictions and social distancing measures have not only caused people to feel isolated and anxious, but have also cost millions their livelihoods, especially women working in the agricultural sector or the informal economy. Families around the world have been forced to reduce their spending, even on essential food items.

With entire families confined to the home, women and girls not only have additional household chores, including childcare and providing meals with minimum resources, but have also lost their privacy and mobility.

Violence against women and adolescents, especially girls, has increased since the start of lockdown. Many victims are confined with their abusers with little or no support. Even where support is available through helplines or digital platforms, many are unable access it due to limited privacy or lack of digital connection.

Educational institutions, including schools, colleges and vocational training centres, have been closed, jeopardizing the futures of many young people. As countries have shifted to distance learning, students with limited or no access to the internet have been missing out on education. School closures have also prevented school feeding programmes, exacerbating food insecurity and placing millions of children who depend on school meals at risk of malnutrition.

As financial and human resources are redirected to respond to COVID-19, fewer resources are available for other health and well-being needs, placing millions of lives at increased risk. The disruption and shutdown of sexual, reproductive, maternal, newborn, child and adolescent health and nutrition (SRMNCAH+N) information and services in many countries, combined with fear of contracting the virus at health facilities, is affecting the health and well-being of women and adolescents, especially girls, and will continue to do so after the pandemic. Limited access to essential preventive, promotive and curative sexual



and reproductive health care will extend beyond the pandemic, damaging women's human rights and deepening gender inequality.

Strategies and solutions to address challenges

The range of strategies and approaches being implemented in different countries to address the significant challenges facing women and adolescents during and beyond the pandemic include:

- economic measures in response to loss of livelihoods;
- inclusion of SRMNCAH+N services in lists of essential services;
- using a range of digital tools and traditional media has been essential for maintaining health, social and educational services and for reaching different population groups with health messages and psychological support;

- civil society, humanitarian and non-governmental organizations, as well as self-help groups, frontline and community workers, working together to provide essential services to affected families and marginalized groups during lockdown;
- strengthening dialogue and activities that bring the family together to reduce intra-household violence and stress; and
- support networks and community solidarity are helping to address many of the gaps and inequities within countries.

Policy asks

COVID-19 has revealed grave inequalities within our societies and exacerbated many of the existing challenges facing women and adolescents. We have an unprecedented opportunity for innovative and large-scale action to transform the lives of the most vulnerable. We must build back better, using contextually appropriate strategies that take account of a range of factors, including gender, age and access to resources. This is essential to ensure that the short, medium and long-term benefits produced outweigh any potential harms.

Women and adolescents must be consulted and engaged in decision-making processes at global, regional, national and local levels, including in taskforces, to ensure that their lived experiences are meaningfully addressed in the COVID-19 response and recovery pathways.

Supporting the [PMNCH Call to Action on COVID-19](#), and based on the lived experiences of women and adolescents analysed for this brief, we call for a collaborative approach across governments and all stakeholders to address the following seven policy asks.

1. Maintain essential SRMNCAN+N services, products and information, including for contraception, safe abortion, immunization, safe delivery, stillbirth prevention and mental health.
2. Address gender inequality, including gender-based violence, and ensure the safety and security of women and adolescent girls in integrated response and recovery plans.
3. Increase attention to the mental health needs of those, especially women and adolescents, who have been severely affected by the pandemic.
4. Adopt and scale up social and economic relief measures that are gender-responsive and reduce inequities.
5. Address adolescents' needs for education and vocational training.
6. Address the digital divide within countries and between genders.
7. Collect and report disaggregated data (by age, sex, income, disability, geography) and gender statistics.

More information available at:
<https://www.who.int/pmnch/knowledge/publications/lived-experiences-covid19/>