



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

### **Increased violence, lack of safety and reduced agency**

**“I am afraid of being confined because my husband is very violent. He even tried to hang me a few days ago.”**

Women and adolescents are bearing a disproportionate burden during COVID-19 crisis. Here we look closer at the experiences related to increased violence, lack of safety and reduced agency. We also highlight the range of solutions and approaches being implemented in different countries as well as the policy asks to address increased violence, lack of safety and reduced agency and other significant challenges facing women and adolescents during and beyond the pandemic.

Emerging data shows that violence against women and girls, particularly domestic violence, has increased since the outbreak of COVID-19. It was estimated that a six-month lockdown could result in 31 million additional cases of gender-based violence.<sup>[1]</sup>

School closures across sub-Saharan Africa have exacerbated girls' vulnerability to physical and sexual assault as well as their risk of early marriage.<sup>[2]</sup> Anecdotal reports from Kenya suggest an increase in gender-based violence since the beginning of lockdown. Sexual exploitation, including transactional sex, and cases of early marriage, rape and defilement have been rising, especially against girls in informal settlements and during curfew hours.

The COVID-19 pandemic is also eroding efforts to reduce female genital mutilation (FGM). Anti-FGM advocates in Kenya report that its proponents are taking advantage of lengthy school closures to submit girls to FGM while they have time to recover before returning to school.<sup>[3]</sup>

Women and adolescent girls from nine Indian states reported increased verbal and sexual abuse since the start of lockdown. The reopening of liquor and wine shops was identified as a contributing factor.

**“When shops selling alcohol were closed, why did the government re-open them? If they hadn't re-opened, it would have been fine. Because when they sit jobless ... they get drunk and create a ruckus. It has a lot of effects. They call out dirty abuse, which is hard to explain to my younger siblings.”**

— Adolescent girl, India



In India it was also feared that parents would see lockdown as an opportunity to arrange marriages at low cost, with a dowry to be received after lockdown. Respondents from India reported anecdotal evidence of increasing rates of early marriage among adolescent girls.<sup>[4]</sup> Similarly, key informants in Kenya reported many stories of families marrying off their adolescent daughters in order to reduce the cost to the household and so stave off hunger and homelessness.

Reports from India and the Latin America and Caribbean region confirm that lockdown has confined many women and girls at home with their abusers. Women and girls have reported feeling anxious and fearful, especially about their inability, due to limited mobility and reduced transport services, to access police or other bodies to protect them from violence.

**“Life here with COVID-19 has been very hard. I am afraid of being confined because my husband is very violent. He even tried to hang me a few days ago. I just left home to visit my neighbour, who is the pastor's wife. She knows what I am living through, so she gave me a note about where to get help. She called the number because I don't know how to use the phone. It is a service to help victims of violence against women.”**

— 28-year-old woman, Ecuador

Women's and adolescent girls' decision-making and autonomy have also been adversely affected by COVID-19. For example, Indian women whose husbands were previously working and living away, but were now staying at home, were having to cede authority to them as head of the household, and women who lost earning power thereby also lost control over their own assets. In other cases, women still in work thought that their unemployed partners begrudged them this benefit.



“Her co-workers are scared because their husbands have become unemployed: in addition to becoming poorer, they also feel resentment from their partners for being the main breadwinners during the crisis.”

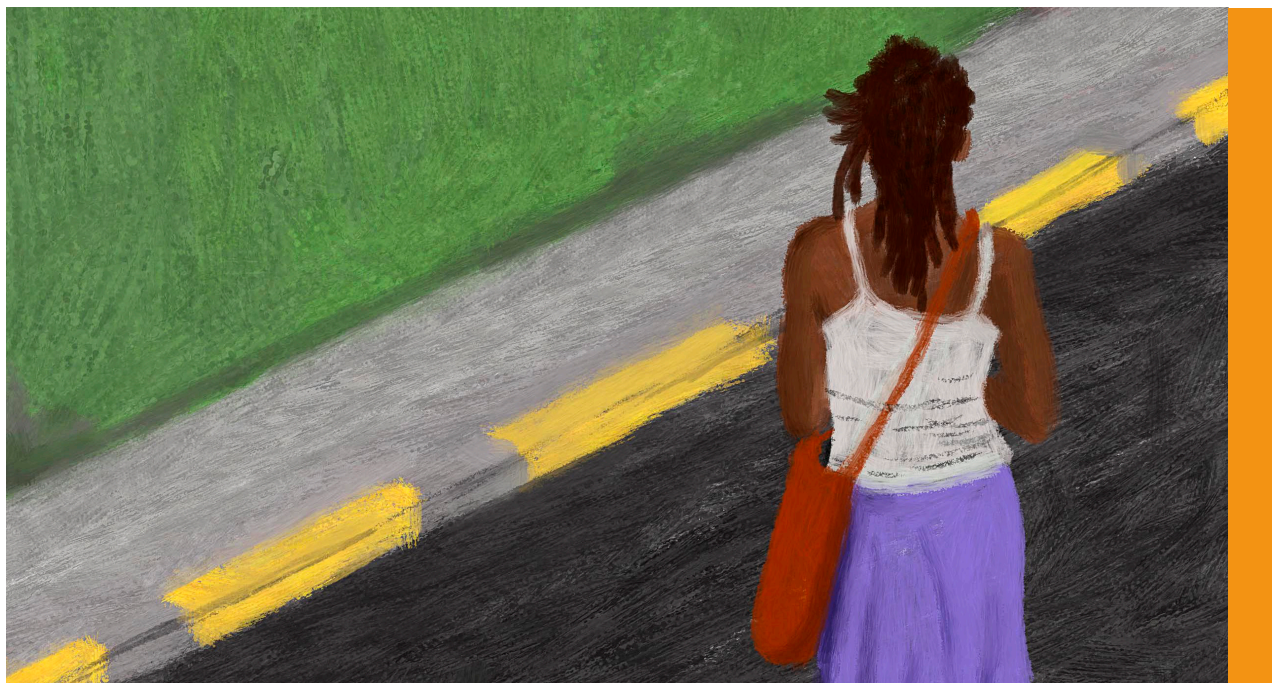
— 50-year-old woman, Belize

Indian women living apart from their families reported receiving threatening calls from landlords demanding rental payment; others were evicted when they lost their jobs and were unable to pay rent. Travelling alone on public transport was another concern, with some women and adolescent girls fearing they might be raped while travelling. Similar fears were reported in Kenya.

“What will I do if I go into labour at night? The police are so brutal, and I’m afraid I might be beaten for breaking the curfew.”

— Pregnant woman, Kenya

Violence against transgender people has also risen. Transgender people in Colombia felt less safe during lockdown and reported transphobic incidents since the start of the pandemic, including police threats and abuse. Some fear being assaulted when walking alone.



“Well, since quarantine started, there have been more robberies because people are looking to cover their needs, and those who cannot work steal. ... there were more than 20 cases of violence in supermarkets, a trans woman was stabbed ... there’s a wave of transphobia in many social networks.”

— 27-year-old woman, Colombia

**Figure 1.**

**Summary of solutions to challenges posed experienced by women and adolescents during COVID-19**



## Strategies and solutions

A range of strategies and approaches are being implemented in different countries to address the significant challenges facing women and adolescents during and beyond the pandemic. The figure below summarizes the most common solutions identified by partner organizations to address increased violence, lack of safety and reduced agency as well as the other challenges experienced by women and adolescents. These solutions are not exhaustive but reflect the perceptions and experiences of those who participated in the country-specific activities.

### Illustrative examples from partner organizations of solutions and approaches used to address increased violence, lack of safety and reduced agency across different countries

- Digital platforms (apps and WhatsApp) and helplines have been important means of reaching individuals suffering from violence.
  - a. In India, the National Commission for Women and various state governments advertised helpline numbers widely, including WhatsApp-based support services for reporting incidences of violence. In Bihar, the Bandhantod (Break the Bond) app reflected increased complaints of child marriage during lockdown, enabling it to be successfully addressed.
  - b. In several Latin American countries, “Purple” telephone helplines assisted women and girls who had experienced violence; in Brazil, tools such as the Partiu Papo Reto app were developed to support survivors of sexual and gender-based violence.
  - c. In Colombia, La Red Comunitaria Trans, a transgender community group, created an anti-discriminatory, anti-violence group on WhatsApp to support trans people during quarantine. This enables people to share their location and itinerary when they leave home, and to report any incidents of concern.

- In Colombia, teenagers and young women indicated that the tight social bonds between neighbours have been vital in generating community strategies of vigilance and mutual support. Neighbourhood meetings have established measures to protect residents, not only from COVID-19, but also from threats to their safety.
- In Ethiopia, Amref's Youth Advisory Parliament initiated an awareness-raising campaign on gender-based violence, with the motto "NO MORE VIOLENCE".
- In Kenya, Tunawiri, a grassroots gender justice movement, supports community networks to respond effectively to sexual and gender-based violence, through communication, advocacy and monitoring and evaluation. Tunawiri has uploaded a petition on change.org and mobilized grassroots organizations to support the campaign.

## Policy asks

Supporting the [PMNCH Call to Action on COVID-19](#), and based on the lived experiences of women and adolescents, seven policy asks are put forward. These asks seek to respond to the consequences of COVID-19 in both the medium and long term and will require a collaborative approach by governments and all stakeholders. The action required will need to address increased violence, lack of safety and reduced agency as well as the other challenges experienced by women and adolescents, including related to mental health, livelihoods, and access to essential services.

1. Maintain essential SRMNCAH+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.

### Illustrative actions and asks from partner organizations to address increased violence, lack of safety and reduced agency

- Classify prevention and redressal services that reach out to women facing violence and distress as essential services and ensure they remain fully functional. These services should form an integral part of COVID-19 response plans.

- Ensure that laws governing gender-based violence are adhered to, and perpetrators are dealt with efficiently and promptly.
- Disseminate guidelines and advisories on all types of violence, and ensure that community-level organizations, CSOs and other bodies working on the ground are well informed.
- Increase community-level awareness of what constitutes gender-based violence, legal provisions and rights of victims, service availability and reporting mechanisms.
- Support and empower community and youth networks to promote and expand reporting channels and access to protection during quarantine.
- Train and build the capacity of front-line, social and community health workers to detect and refer victims and to report cases of violence and abuse.
- Strengthen security and justice officials' capacity to investigate and prosecute acts of violence and emphasize their responsibility to do so.
- Increase the number of women police officers trained to work sensitively with women and adolescent girls needing help.
- Conduct campaigns to promote non-violent conflict resolution within families and provide them with tools to foster family ties and build a safe environment, including learning new skills together, home recreational and entertainment activities, anxiety and anger management and communication, etc.

- Reformulate and adapt traditional response mechanisms to provide victims of violence during lockdown with support and information on service availability. These could include toll-free helplines, support groups, referral pathways and online counselling, etc, and should be easily accessible and well resourced.
- Support and resource organizations responding to sexual and gender-based violence to continue supporting women and girls during and after the pandemic.
- Put in place mechanisms for collecting sex-disaggregated data, and conduct gender-responsive analysis to inform inclusive and comprehensive COVID-19 prevention, response and recovery strategies.
- Ensure that Preparedness and Response Plans include campaigns against FGM where needed and scale up anti-FGM campaigns during the pandemic. One approach would be to ensure that information about FGM is included in dignity kits, which can serve as an entry point for providing information and messages about gender-based violence and FGM.

## References

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More information available at:

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