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THEME - THE SHADES OF THE SHADOW PANDEMIC AMIDST COVID - 19



Editor - in - Chief: Prof.K.MANIMEKALAI

Editors Dr. I. Sivakumar

Dr. P. Sindhuja

Ms.M. Bhuvaneshwari Mr.B. Pon Vignesh

Ms.N.NoorNaina Mohammed

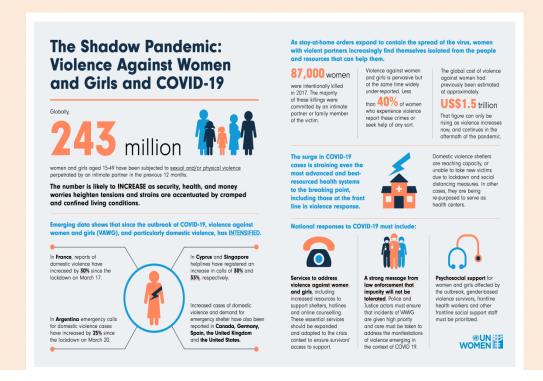
Editorial desk

Since the outbreak of COVID-19, reports from the front lines, have shown that all types of violence against women and girls, particularly domestic violence, has intensified. Sexual and gender-based violence is an unseen consequence of the COVID-19 pandemic. Pre-existing social norms and gender inequalities, economic and social stress that coupled with restricted movement and social isolation measures have led to an exponential increase in GBV during covid 19 pandemic. The measures taken to protect population during epidemic or pandemic left women and girls especially vulnerable to violence. Socio-economic stressors such as employment and external stressors such as food insecurity and family relations have a significant impact, not only on experiences of violence or feelings of safety but also on women's overall well-being. From the beginning of the ongoing corona virus pandemic there has been a lot of media attention paid to their relationship between female and male leaders of various nations in effectiveness of their handling of the covid 19 crisis. The Global Gender Gap Report 2020 shows that the countries fought against the pandemic most effectively led by women are high on the list. It also reveals that the same countries rank high when it comes to having women on corporate boards. The presence of women leaders is indeed needed as they focus on both the gender for promoting gender parity during crisis too. When women occupy in decision making bodies they are able to lead gender responsive governance that leads to have gender fair society. This bulletin provides a vital message that urges people to act to support women if they know or suspect someone is experiencing violence. This

bulletin also provides concrete actions and strategies that UNDP, UN agencies and other development partners that take to prevent and address GBV in the context pandemic.



It has been two years since the pandemic started, and we now have effective vaccines to prevent further spread and worse outcomes from COVID. The mortality rate from the pandemic has slowed down; businesses and the economy have gradually risen back to a seemingly well-functioning system. However, in the shadows of COVID-19, there was another pandemic arising that unfortunately was *masked by the pressing nature* of the COVID pandemic. This is now termed the "*Shadow Pandemic*": the increasing rates of violence against women and children, since the onset of COVID-19 pandemic. According to the United Nations, approximately 1 in 3 women suffer from intimate partner violence (IPV) and non-sexual violence. Before the pandemic, 243 million women and girls were victims of sexual and physical violence. Since the pandemic, this number has risen to 736 million women and girls (UN Women, 2021). These statistics exclude the number of women who experienced anxiety, depression, unplanned pregnancies and exposure to STDS. Sadly, most of this violence is known to be perpetrated by the current and former intimate partners of these victims.



HOW DID COVID-19 CONTRIBUTE TO THE SHADOW PANDEMIC?

As the COVID-19 pandemic grew, health sectors were overwhelmed, domestic violence shelters had exceeded their capacity and physical movement was limited. These factors subsequently led to the following consequences:

- Threatened financial security and inability to afford adequate health care
- ➤ Restricted physical movement, especially in cramped living conditions in some countries
- ➤ Increased exposure to and isolation with abusers
- Reduced security due to deserted public spaces

These consequences of COVID-19, coupled with the underlying factors for intimate partner violence and sexual violence such as harmful use of alcohol, marital discord and dissatisfaction, difficulties in communicating between partners, and low levels of gender equality, intensified the rate of violence against women and girls.

THE HEALTH IMPLICATIONS OF THE SHADOW PANDEMIC

Constant exposure to violence in this vulnerable population of women and girls affected their mental and physical health such as violence led to increased rates of:

- ➤ Physical trauma, including genital trauma, and disability
- Mental health problems such as PTSD, anxiety, depression and suicidality
- ➤ Unwanted pregnancies, abortion, HIV and other STIs, pregnancy loss and prematurity, lack of contraception and unsafe sex

ACTION TAKEN BY WHO AND UN AGENCIES

In 2019, the WHO and UN collaborated with other ten UN agencies and developed the *RESPECT* framework that outlines intervention strategies to prevent violence against women during pandemic. The seven-letter word stands for:

- ➤ Relationship skill strengthened
- **E**mpowerment of women
- > Services ensured
- Poverty reduced
- **E**nvironments made safe
- > Child and adolescent abuse prevented, and
- > Transformed attitudes, beliefs, and norms

This framework has given rise to a range of interventions including couples counseling therapy workshops, financial empowerment initiatives for women in South Africa, and the Community Advocacy Project in Michigan and Illinois – which helps women survivors of IPV regain control of their lives. In places like Ecuador, cash, vouchers and food transfer programs have been implemented by the World Food Programme to reduce poverty in resource-limited areas. Safe play areas have been created by public school systems in Pakistan. Other community mobilization interventions have been created to shift the power balance between men and women in Uganda.

In 2020, United Nations developed the Spotlight Initiative, "the largest global multiyear partnership between the European Union and United Nations to eliminate all forms of violence against women and girls by 2030" (United Nations, 2020). The initiative focuses mainly on strengthening existing agencies, policy reform, and changing societal attitude and stigma regarding domestic violence against women.



Source: (World Bank, 2020)

TYPES OF INITIATIVES



1 ADJUSTMENT TO JUSTICE SECTOR RESPONSE

Countries such as Bolivia, Mexico, and Australia have adapted their justice systems to accommodate survivors needs such as changes to criminal code, increase in electronic monitoring, improving access to restraining orders, virtual hearings and protection order renewal, increase time to report, and increased training for police.

2 COMMUNICATION CAMPAIGNS USING MASS MEDIA

Countries such as Kenya, Ireland, Peru and Colombia have supported media informational campaigns such as music videos, cartoons, hashtags, infographics, radio and TV advertisements to share information on services available and support for survivors.

3 INCREASED RESOURCES

Countries such as Belgium, Serbia, and Malaysia have increased resources available to survivors by classifying shelters as essential services, increasing hours for hotlines, and coordinating with private sector to provide free or discounted services (hotels, transportation, moving services).

4 INNOVATIVE SUPPORT

Countries such as Guatemala, India, Spain, France, and South Africa have piloted and supported innovative methods to provide services to survivors such as color coded flags, wordless signs that an individual needs help (symbols or hand-signs), code words (Mask19), banning alcohol sales, discrete service providers at pharmacies and markets, discrete or hidden Apps, and online counseling.

5 INCREASED FUNDING

Countries such as the UK, Australia, Canada, and Italy have committed to increasing funding for antidomestic violence organizations by committing an additional \$1 - \$92 million in funds to support survivors and service providers.



Visit the GBV & COVID-19_Initiatives Document

Source: (World Bank, 2020)

FACTS AND REALITIES THAT OCCURED AMIDST COVID 19 – INDIA

- ➤ The National Commission for Women (NCW) has recorded an over two-fold increase in complaints since the imposition of lockdown in the country. While a total of 116 complaints from women were received in the first week of March (March 2-8), the number increased to 257 in the last week of March post the declaration of the lockdown (March 23- April 1, 2020). Of the 257 complaints received by them, 69 were of domestic violence. Similarly, complaints relating to the "right to live with dignity" too have doubled, rising from 35 cases to 77. Such cases could pertain to discrimination on the basis of gender, class or caste or all three of them combined. Between April and May 2020, NCW received a total of 3027 complaints across 22 categories of crimes against women, of which 1428 (47.2%) were cases of domestic violence and intimate partner violence. In comparison to data recorded for January to March 2020, wherein there were 4233 complaints, of which 871 cases recorded were of domestic violence and intimate partner violence (20.6% of the total).
- ➤ Data from National Legal Services Authority (NALSA) collected through 28 State Legal Services (SLAs) have observed an increase in cases of domestic violence

- during the lockdown. In April, 89% of the total number of violence cases registered were of domestic violence.
- According to the Mobile Gender Gap Report 2019 by GSMA, among adult women, 59% own a phone (as compared to 80% men), and only 16% adult women have access to the internet.

GENDER RESPONSIVE MEASURES INITIATED BY THE GOVERNMENT OF INDIA DURING COVID 19 PANDEMIC

- ➤ UN Secretary General made an appeal to the leaders of the Members States to put 'Women's Safety first' and include gender responsive measures in their plans to address the challenge of COVID-19, India was among 140 countries to endorse the Call.
- Efforts have been made to ensure that existing government schemes such as One Stop Centres, Ujjawala Homes, and Emergency Response Support System remain operational. Notably, 33% of violence complaints were made via the NCW's WhatApp based helpline launched in April 2020, suggesting that a discreet method of reporting was much needed during the pandemic. State government initiatives, such as Uttar Pradesh Police's "Suppress corona, not your voice" campaign, Odisha Police's Phone-Up programme, Kerala State Commission for Women's telecounseling facility, Maharashtra Government's Akshara Centres, Special Cell for Women and Children, and the #LockdownOnDomesticViolence campaigns were important steps, signalling intolerance for domestic violence across the country.
- The Ministry of Women and Child Development (MWCD) issued advisories for all One Stop Centres, 181 Women Helpline, institutional machinery implementing various women's safety related legislations (Protection Officers and service providers under Protection of Women from Domestic Violence Act 2005, Child Marriage Prohibition Officers under Child Marriage Prohibition Act, 2006, Dowry Prohibition Officers under Dowry Prohibition Act 1961 etc.), to continue providing essential services to women and girls affected by violence.
- ➤ The National Commission for Women in April launched a special WhatsApp helpline number (0721-7735372) for women to access help, in addition to the email and online complaint mechanisms which were already operational.
- ➤ Uttar Pradesh was one of the first states to recognise and initiate messaging on domestic violence the 112-emergency helpline, creditably published a message, "Suppress corona, not your voice," and promised provision for a female officer to handle each gender-based violence case.

- ➤ The District Administration of Ranchi, Jharkhand launched two helpline numbers to provide legal counselling to women affected by domestic violence
- ➤ The Kerala Government launched a 24-hour WhatsApp number (9400080292) to report cases of domestic violence during the lockdown in the state
- ➤ Delhi Government launched a special WhatsApp number, following a High Court order. The Delhi High Court on April 24 directed the Delhi Government and the Central Government to ensure effective implementation of the Protection of Women from Domestic Violence Act, 2005 in the wake of the increase in the cases of domestic violence during the lockdown.
- The Ministry of Home Affairs has issued an advisory for women's homes being exempt from COVID-19 lockdown with the support of necessary staff.
- ➤ The Ministry of Health and Family Welfare in collaboration with "NIMHANS" has started a helpline 080 46110007 to provide psychological support to victims of domestic violence.
- The Ministry of Information and Broadcasting has issued an advisory to all private satellite TV channels and FM Radio channels to give adequate publicity to the emergency response helpline number 121 on women safety and persons in distress.
- ➤ The Anganwadi workers worked in tandem with the police and One Stop Centres to assist women with domestic violence complaints

THE RESPONSIBILITIES OF THE INDIVIDUALS

This Shadow Pandemic is not unique to resource-poor countries or communities. It is more prevalent than is assumed. Response to mitigate the impact of VAWG is not limited to large institutions and corporations alone. If, as a health worker, family member or friend, you are concerned about someone who may be suffering from intimate partner violence, sexual or non-sexual violence, you can:

- help women who disclose their sufferings and assist first-line support and relevant medical treatment. First line support includes: listening empathetically and without judgment, inquiring about needs and concerns, validating survivors' experiences and feelings, enhancing safety, and connecting survivors to support.
- reate awareness about the issue as well as the resources available to tackle it. It is important to ensure that it is safe to connect with women when the abuser is present in the home
- isseminate the information about services available locally (e.g. hotlines, shelters, rape crisis centers, counselling) for survivors, including opening hours, contact details and whether these can be offered remotely, and establish referral linkages.

Together, with a shared vision for change, we can end the shadow pandemic of GBV during COVID-19 and beyond. Let's all join hands to make a zero violence country.

