

# Urgent need of gender analysis in coping pandemics like Covid-19

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Since the widespread disruption caused by the Covid-19 pandemic, affecting all regions of the world, special attention has been drawn to the negative impact of pandemics on gender inequality. Global health, economic upheaval, and social, political, and demographic issues are highlighted in the field of development with regard to the difficult integration of gender in the management of pandemics and recovery plans. How and why do pandemics affect gender inequality, and how does this inequality compromise responses to local and global outbreaks? Why do gender and intersectionality frameworks need to be used to investigate the impact of pandemics on individuals and communities? In this essay, we will elaborate on these questions, which are central in the online course *Gender in times of pandemics* at the Graduate Institute of International and Development Studies, in which we are both teaching.

## **Gender and intersectionality**

Gender has been used as an analytical category in development studies for the last fifty years. The paradigm shift from “women in development” to “gender and globalisation” has opened up various avenues, from the consideration of women as a homogeneous category to the adoption of gender as an analytical framework in order to deconstruct power relations, including the study of masculinities (Scott 1986, 2010; Verschuur 2015; Reysoo 2015). The

intersectionality perspective was added to bring forward that the categories of “women” and “men” are influenced by and interconnected with a variety of differences, like sexual orientation, age, race, class, and ethnicity. While anthropologists have drawn attention to the strong influence of social and cultural norms and practices on gender inequality (Brodkin 2006), Black and Third World feminists have provided critical observations of individual freedoms and rights limited by existing institutions, norms and public policies (Mohanty 1984).

Pandemics play an important role in the exacerbation of gender-based inequalities by increasing existing gender gaps in many fields. Feminist anthropological approaches provide methodologies and perspectives to analyse how policies and practices cope with pandemics – using participative, individual and community-based approaches – and address gender-based needs of women (and men) in short and long-term programmes and projects.

## **Gender inequality and the informal economy**

The informal economy, especially in low and lower-middle-income countries, affects more women than men and usually constitutes their unique source of income (85-92% of women in Africa, East and Southeast Asia and Latin America) (ILO 2018). Many women are working as street-food vendors, cross-border traders and small subsistence farmers. In the majority of the countries in the world, women are the main caregivers, responsible for food security, in charge of water resources, education of the children, family planning, care of sick relatives, etc. and are often stigmatised when refusing or failing to do so. It is mostly women who “absorb shocks” during political, social, and economic upheavals, and in health crises because of pandemics. In the sex-segregated health services, women are over-represented in the lower-paid but vital jobs (Boniol et al. 2019). In Asia and the Pacific, the current Covid-19 pandemic implies a loss of livelihood, income and/or working hours among women migrants,

domestic workers and those employed in informal economies. They suffer from complete isolation and invisibility in terms of public responses to the pandemic, compromising their access to health care, decent living conditions, and reinforcing the spiral of poverty (CARE 2020).

Several rapid gender assessments conducted at regional and national level indicate that women working in the informal sector have been affected more than men by lockdown measures with limitation of movement in public spaces because of the current Covid-19 pandemic. Loss of income has driven many women to use all their savings. Development programmes supporting the empowerment and agency of women, including those who were self-employed and involved in low-income activities, have been confronted with the reduction of cash availability and transfer, and the suspension of economic activities. This is nothing new. Small-scale activities, even if supported by micro-loans, are insufficient to establish long-term household and individual safety nets and protect savings (Banerjee and Duflo 2011). In most African and Southeast Asian countries, governmental responses to the Covid-19 pandemic only cover compensation for formal economy enterprises and exclude workers in the informal economy. Different studies suggest that the feminisation of poverty will be accentuated by the present crisis.

### **Human rights versus development perspectives**

The impact of pandemics from a human rights perspective has been analysed in studies of Ebola, Zika (Harman 2016; Smith 2019), and more broadly in those of HIV/Aids epidemics (Austin and Noble, 2014; Pulerwitz et al. 2010). Sociocultural norms expose women to unnecessary health threats, and gender norms are more important than economic status in determining individual women's health status (Parfitt 2015). A gender and human rights perspective has been adopted in studies of the impact of Ebola on both women and men especially in Liberia and Sierra Leone (Davies and Bennett 2016;

Androsik 2020). There are evidence-based findings on the rise of domestic violence, the reduction of women's economic resilience, and the increase in maternal mortality due to restricted access to prenatal care and medical assistance during childbirth. These studies also underlined the increase of discrimination and stigmatisation of women belonging to families affected by the disease or caring for sick family members (Minor 2017). In the field of HIV/Aids studies, a direct connection between the deterioration of women's economic agency, health, and living conditions has been observed in households and communities where the disease is rife. It may be that a human rights perspective is limited by a too wide approach and weak implementation mechanisms compared to development programmes and projects (Closson et al. 2020). Policies and health responses to Covid-19 have not sufficiently addressed the gendered impact of diseases and have not heeded all the lessons that can be learned from recent epidemics (Wenham et al. 2020).

The redirection of health services and funds towards the Covid-19 outbreak has contributed to the reduction of "non-essential" health supplies. The UN population fund (UNFPA) estimates that up to seven million additional unintended pregnancies will occur worldwide in the post-pandemic year due to disruption in family planning needs, and studies conducted in different countries indicate a direct relation with the increased number of child marriages and undercover abortions (Cousins 2020; UNFPA 2020). The estimate, based on a survey carried out in 37 countries and direct informal interviews conducted in the UK, India, and South Africa (targeting 1,000 women aged from 16 to 50), is that more than 1.3 million women have been deprived of access to contraception or safe and legal abortions (Mary Stopes International 2020).

Another issue concerns the increase of domestic and intimate partner violence in the context of full and partial lockdown. Reported data shows that domestic violence and femicides have increased (Kumar 2020). Data from Brazil (March-April 2020) "point to a 22%

increase in femicide [...] comparing to the same period of 2019” (Bastos et al. 2020). Recent quantitative studies suggest that the number of calls to police to report domestic violence increased by 131% in May 2020 in districts in India under stricter restriction rules (Ravindran and Shah 2020; Das et al. 2020). Less data is available for Sub-Saharan Africa, where a high level of domestic violence already exists and affects between 49% (in Mali) and 70% (in Ivory Coast cities) of women (Sambé et al. 2020; Apata 2019).<sup>2</sup> However, cases reported to local women’s rights associations indicate a sharp increase (Chukwueke 2020). Local radio programmes were called upon for support in a bid to prevent violence against women during the Covid-19 crisis.

### **Mobilisation to fill in the gaps of gender-blind policies**

Government responses to the Covid-19 pandemic focus on economic support and the provision of healthcare services. Most of these responses are gender-blind, or at best target women as a vulnerable category together with disabled persons, ethnic minorities, and the elderly, without specifying their respective vulnerabilities.

Immediately after the outbreak of the Covid-19 crisis, the first measures by decentralised authorities were concerned with survival and strengthening support of associations in the realm of social economy. Numerous local initiatives have emerged to prevent and mitigate the negative impacts of the pandemic. Economic solidarity projects try to respond to the Covid-19 crisis. In Senegal, the “Household Food Basket” programme (as a part of the UN response plan) aims at redistributing local production for food assistance by supporting small-scale farmers living in rural areas (FAO 2020). It is meant to back up women farmers who are unable to sell their products. In Brazil’s favelas, community organisations provide food and hygiene kits to isolated, vulnerable persons and categories like informal workers, large families, and single mothers. Myriad of NGOs set up virtual platforms in order to receive food and hygiene kits and

support information campaigns. In Colombia, red rags were hung out of the windows of houses with families in urgent need of food, and volunteers were mobilised to cook and distribute dishes (Otis 2020).

Women’s organisations were in the frontline to provide vital assistance and support to victims of domestic violence and adapted their services to set up partnerships to create contact points for shelter and counselling during local lockdowns, e.g. Beyond Borders in Haiti, International Foundation for Crime Prevention and Victim Care (PCVC) in India, Association Fenomena in Serbia, Solfa in France, Ending Violence Association in Canada (UN Women 2020). Local NGOs and volunteers working in the field of women’s rights have been mobilised to trace and collect information during home visits in India and Senegal (Changoiwala 2020; Equipop 2020). Most of them are using their regular funds and cannot compete in fundraising with international organisations (ActionAid et al. 2020).

These examples show women’s competences and capacities to face the crisis. However, since women’s solidarity mainly expressed itself around food and health, commonly characterised as “women’s affairs”, efforts provided by both formal and informal organisations are at a high risk of being labelled “natural” and of not being supported by policy-makers in the long run. Yet, women will continue being key actors in their communities and families. They are the *Rosie Riveters* of the Covid-19 pandemic. Unfortunately, despite these important efforts of women’s organisations, they are under-represented in response coordination committees, and in decision-making processes on various levels.

### **Concluding remarks**

Above, we have outlined some aspects of the current gender-blind policy responses to the Covid-19 pandemic. These are focused on the formal economy and neglect the importance of women’s contributions in the informal economy. As long as macro-economic parameters are prioritised over social justice (like in the classical *trickle-down*

theory), sustainable development goals will never be achieved. If the socio-economic and health status of women suffer more backlashes, and if violence against women increases, development goals will suffer even more severe setbacks. Gender-blind recovery plans confirm that policy-makers largely ignore research showing that women are key pillars of development at all levels. Making visible the vital contributions of women and women's organisations, and funding local initiatives that generate real economic and solidarity activities is a key strategy for development in general, and especially in times of pandemics. Neglecting the structuring power of gender on access to basic human rights (such as health, education, income, body integrity etc.) in policy-making may result in the violation of these rights.

Theories and good intentions to overcome gender inequality are not sufficient to provide programmes and projects that work during and after pandemics. A detailed understanding of the problems and evidence-based solutions are needed to improve policy interventions and pandemic management. The course *Gender in times of pandemic* highlights knowledge and long-standing experiences and methodologies from feminist anthropology which should be used to adapt the current genderblind policies and practices in response to the Covid-19 pandemic.

## Notes

<sup>1</sup> While the paper is the result of a common effort and close collaboration at the Graduate Institute, for the sake of disclosure and in keep with accepted guidelines for collaborative authorship assessment, we'd like to bring to the reader's attention that Olha Gazziero Mykytyn is to be held accountable for the content of the sections [1] through [4]. The same goes for Claudy Vouhé, as far as sections [4] and [5] are concerned. We would also like to acknowledge valuable insights and suggestions of Fenneke Reysoo, Liliana Soler-Gómez Lutzelschwab, and editors who have extensively reviewed the draft of the paper.

<sup>2</sup> The rate of women victims of VAW in Mali is estimated by the Timbuktu Institute (Sambé et al. 2020) and in Abidjan (Ivory Coast) by the CPDFEM (Apata 2019).

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