

¹Nepali Women speak about Covid-19—Hear their requests²

We, the undersigned organizations committed to feminist principles and women’s human rights, call on the Government of Nepal to recall and act in accordance with human rights standards in their response to COVID-19 and uphold the principles of equality and non-discrimination, foregrounding the needs and interests of the most marginalized people -- women, children, elderly, people with disabilities, rural women, LGBTIQ+, sex workers, those in the informal economy refugees, migrants, indigenous peoples, and people without identity documents. It is critical that the COVID-19 response does not exacerbate their vulnerabilities or magnify existing inequalities. We have identified the following areas of focus to be considered in the context of the COVID-19 crisis.

Immediate Priorities

1. *Ensure access to timely, accurate and regular risk communication information in multiple languages*

Ensure equal access to information, public health education and resources in multiple languages (Bhojpuri, Mathili, Tamang, Newari, Tharu etc.), including sign and indigenous peoples languages, accessible formats, and easy-to-read and plain languages This must be conveyed using traditional and non- traditional mediums as many women and excluded groups lack access to basic information. Concepts such as quarantine, social distancing and segregation need to be simplified and explained using illustrations. At the same time, it is important that social inequalities based on sex, caste, ethnicity etc., are not reinforced through such messages. Information on Ministry of Health hotline (1115) must be clearly conveyed.

2. *Recognize specific needs of women healthcare workers*

Women constitute 54 per cent of the workers in the health and social sectors in Nepal and are on the frontlines of the response. Out of the women in Nepal’s health and social sector, two thirds are in informal employment.³ Women healthcare workers have called attention to their specific needs beyond personal protective equipment, including to meet menstrual hygiene needs. Psychosocial support should also be provided to frontline responders

3. *Increase access to COVID-19 testing*

The Government should expand testing, especially with the possibility of community transmission Even with existing capacity, the Government needs to ensure that those who are the most vulnerable are able to get tested if suspected of having coronavirus. The cost of testing should be borne by the Government, whether done in Government hospitals or private laboratories

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² This has been compiled by UN Women on behalf of three women’s networks namely Women-Friendly Disaster Management Group, Inter-generational Feminist Group, Women Humanitarian Platform and Disaster Response and Recovery Platform. Information about the networks are on p.6

³ Government of Nepal, National Planning Commission, Central Bureau of Statistics, with ILO (2019) ‘Report on the Nepal Labour Force Survey 2017/18

4. Ensure access to water, sanitation and hygiene, shelter services

In Nepal, not everyone has access to clean running water, hygiene facilities or shelter. These include people living in urban slum, lower income communities, rural areas. In this context, we need to recognize that hand-washing, social distancing may not be possible for a large number of people. We therefore urge the Government put in place infrastructure for clean, potable water to be delivered to underserved areas. Distribution of hygiene packages with necessities including soap, disinfectants, and hand sanitizer should be considered. Further public handwashing stations should be installed in communities/ public spaces, and community shelters created for those in need including the homeless. Existing infrastructure such as schools, community centres can be repurposed.

Short term Priorities

1. Address the increasing care burden on women

The lockdown scenario is increasing the unpaid care and domestic work for women including child and elderly care. Women's health will bear the burden of this. Messaging must highlight shared parenting/ care responsibilities and equitable division of household chores. Psycho-social support through helplines is needed to manage stress and support wellbeing.

2. Response to gender-based violence against women/girls, people with disability and LGBTIQ+

The lockdown context with mobility restrictions is confining families into smaller spaces. Previously violent family members are now confined to homes. Physical and emotional abuse can increase due to insufficient availability of money, food, and other essential goods. The toll-free helpline No 1145 managed by the National Women's Commission must function to support victims/survivors of violence with counselling support. Helplines, Shelters and services for all victims of domestic abuse should be considered as "essential services" and law enforcement sensitized to the need to be responsive to calls from victims.

3. Expand social protection measures to reduce the impact on women and excluded groups facing a loss of livelihoods

In Nepal, a large percentage of women are in the informal economy in informal markets and agriculture. They are dependent on daily wages and have limited or no access to savings. Many of the industries in the formal economy directly affected by the lockdown such as aviation, tourism, hospitality, small enterprises and industries, also employ significant numbers of women. Women working in these sectors have been forced to take unpaid leave or face the threat of losing their jobs. We welcome the government's directive to the tourism sector to pay two-month salary to their employees. We urge the government to extend this directive to other sectors such as retail, manufacturing, transport, aviation, hospitality and consider the creation of a dedicated workers' relief fund to finance this package in an effective and transparent manner.

The Government should expand social security provisions to ensure that women and excluded groups (including female headed households, single women, young women, elderly women, women with disabilities, women with health issues) are protected, including through targeted support packages, compensatory payments and cash-based transfers. Expedite the distribution of benefits/support packages

Recommendations for a Stimulus Package

- Provide economic security for women led/owned micro, small and medium business owners (MSMEs) including tax exemptions, suspension of mortgages, and loans
- Increase collateral free loans for women's groups/ self-help groups
- Announce financial relief measures such as a 90-day grace period for filing income tax,
- Consider a moratorium on repaying personal bank loans and restructuring of easy monthly installments
- Provide Universal Basic Income
- Provide additional financial support to the most vulnerable groups, such as migrants, elderly people, people with disabilities, survivors of violence
- Ensure that the financial support packages take into account women's unpaid and care burden such as, child-care provision
- Provide fortnightly/monthly payments to casual workers/informal sector workers (including domestic workers, home-based workers) for the next six months to enable them to cope with the longer-term impacts of the crisis. Such efforts should target women in more hidden/invisible forms of work including sex-work
- Instruct all employers/businesses to extend paid leave to all staff, irrespective of the type of contract they hold (including those on temporary contracts or on probation period). This should apply to all non-essential service sector workers
- Consider a complete moratorium/ban on retrenchments for the next six months. Large businesses should bear the cost of temporary closure or reduced services, while small and medium businesses should be supported to ensure they can pay workers and meet other essential costs.
- Waive all utility bills from slum dwellers, informal settlements and affected clusters for a period of two months to begin with

4. Ensure food security of most vulnerable households, including female headed households

In an extended period of lockdown, several households may not have access to food and essential supplies. We welcome the Government's move to support those who have suffered loss of wages through a "10 per cent discount on rice, flour, dal, salt sugar and oil supplies from Nepal food Corporation and Salt Trading Corporation"⁴.

We urge the Government to expand food aid to those in need, and not limit it to those who are able to procure an identity card from their ward offices. Further, we urge the government to expand special priority status to female headed households, single women, elderly women, in addition to expecting mothers, orphans, the disabled or those with chronic illnesses; and consider other initiatives such as community kitchens, while maintaining social distance

⁴ For details see: <https://www.nepalitimes.com/latest/nepal-covid-19-relief-package/>

Efforts should be made for supply of food/dry rations to households, where people are unable to leave their homes (e.g. disabled people living alone or in remote areas). The Government should also set systems in place for the direct procurement of food grains from farmers as well as increasing the number of items procured, as normal supply chains could very likely be disrupted due to the lockdown in the coming weeks. Direct businesses should be directed to ration non-perishable food supply to control inventory and increase access for those who, due to their income levels, must purchase over a longer period of time.

5. Ensure availability and access to health services including sexual and reproductive health (SRH)

Evidence from past epidemics from Zika and Ebola, indicate that efforts to contain outbreaks often divert resources from routine health services including pre and post-natal health care and contraceptives, and exacerbate often already limited access to sexual and reproductive health services. Efforts should be made to ensure uninterrupted access health facilities, including SRH services. Without such support, it is likely that maternity mortality rates would go up. Direct all healthcare facilities to provide adequate health care services to people regardless of health insurance status, immigration status.

Attention should also be paid to identifying the specific challenges faced by women from excluded and vulnerable groups and communities such as Dalits, ethnic and religious minorities, women, children, people with disabilities, in accessing health services. Affirm the rights of migrant people and people without identity documents people to seek medical attention free from discrimination

6. Extend additional support to women migrant workers

Due to the travel restrictions placed to contain the spread of COVID, many migrant workers which include elderly women, women with young children are not being able to re-enter the country, including on the road-border with India. Essential services (food, water, shelter and hygiene) should be provided to these groups on a priority basis, through the health posts at the border. Further, women who work as domestic workers abroad may not have access to information. There is need for targeted communication outreach to women migrant workers through the diplomatic missions/embassies. These women, their children and families should be prioritized while providing messages/support packages.

7. Increased participation and representation of women's organizations in coordination mechanisms

The Government should leverage the capacities of women's organizations. Reaching out to enlist women's groups and gender experts will help ensure a more robust community response as their considerable networks can be leveraged to disseminate and amplify social distancing messaging. Further, representation of women's organizations in key government mechanisms for preparedness and response will be critical to ensure that diverse perspectives are reflected in these processes. Information on the creation and use of Emergency/Contingency Funds including the regional SAARC funds should be publicly available.

Long term priorities

1. Promote women's economic security and rights as part of Early Recovery Efforts

Develop targeted economic empowerment strategies and/or explore cash transfer programming to mitigate the impact of COVID-19 outbreaks, including support for populations who were employed during the public health emergency and who lose their revenue stream once the outbreak is contained, and for communities to recover and build resilience against future shocks. Going forward, the President Women Upliftment Programme and other initiatives should be re-purposed to ensure vocational skill development to women from excluded groups, in line with emerging market needs.

2. Support women's networks and community-based organizations

Work with local communities, particularly women's groups, before, during, and after public health emergencies to ensure continued trust, access, and to provide the best possible services

3. Ensure women's leadership and representation in response and recovery decision making

It is important to ensure women's leadership and representation in response and recovery decision-making, at the local, provincial and national level including in health leadership. In addition, peace networks should be supported to engage communities on questions of inequality to ensure that existing fault-lines are not deepened leading to social unrest and conflict.

4. Significantly increase public provisioning for essential services and infrastructure

The COVID-19 pandemic has revealed the huge deficits in the health infrastructure across countries. Going forward it will be critical to significantly increase public provisioning for essential services and infrastructure and move towards universal public healthcare services, universal social protection such as unemployment support, social housing and universal basic income.

About the Networks

Women Friendly Disaster Management (WFDM) Group is a loose network of women-led organizations, formed immediately after the 2015 earthquake with support from UN Women. WFDM was formed with a vision to engender policies formulated and implemented on DRR, preparedness and response, and its mission is to enhance women's knowledge, attitude and practice in DRR and preparedness. WFDM includes a group of women led organizations having extensive experience in implementing projects focusing on women's empowerment, inclusion, rights of single women, Dalit women, women from LGBTI communities, women with disabilities, women's legal rights and media. WFDM members include: Beyond Beijing Committee (BBC), Feminist Dalit Organization (FEDO), and Forum for Women, Law, and Development (FWLD), Home Net South Asia, Jagaran Nepal, SAATHI, Women for Human Rights (WHR)-single women's group, Blue Diamond Society (BDS), Disability Human Rights Promotion Society Nepal & Media Advocacy Group (MAG) and SAARC Business Association of Home Based Workers (SABHA). Through its member organisations and networks, the WFDM is represented across all seven provinces.

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The Inter-Generational Feminist Thought Leaders' Group is a loose network of diverse, intergenerational feminist leaders who have been actively partaking in a series of 'Thought Workshops' facilitated by UN Women Nepal since 2017.

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Women Humanitarian and Disaster Risk Reduction Platform was established in May 2019 as a loose platform of women professionals working in humanitarian and DRR sectors. The platform meets to share experiences, best practices, and knowledge related to humanitarian and DRR sectors and implement actions through forming task force group. As of now, there are about 50 women professionals representing from CSOs, NGOs, INGOs, UN agencies, Academic and Research Institute as well as free lancers/consultants from national to subnational. The platform has Action Plan for 2020. The secretariat of the platform is Center for Disaster Management Studies (CDMS), a Non-government NGO run by women professional. Currently WHDRRP has developed COVID-19 Specific Appeal from Humanitarian Professional.

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