

*In the nationwide effort to tackle the unprecedented public health and socioeconomic crises caused by the COVID-19 pandemic, it is fundamental to consider response and recovery measures through a gender lens, taking into account gender differentiated risks and realities. Women from indigenous communities, survivors of violence, slum dwellers, domestic workers and other informal sector workers, transgender persons, sex workers, persons with disabilities and others already live with the intersectional and compounded discrimination due to class, gender, ethnicity, different ability, occupation, etc. that result in their socio-economic marginalization. The absence of gender-sensitive intersectional responses to COVID is aggravating the already unequal access to information, services and resources that women, girls and gender diverse persons face, further putting them at risk of violation of their human rights.*

*UN Women Bangladesh has established the Gender Monitoring Network to regularly gather information from community-based women's organizations, CSOs, and gender-issue focused NGOs on the challenges that women and gender diverse people are facing so that their collective voice can be channeled to policy makers to ensure that the response plans and initiatives of the government, UN and development partners and civil society organizations are gender responsive.*

## Key issues and challenges faced by women

The key issues clustered below are gathered from information received from the network members and the situation updates shared by them through a consultation call on 22 April 2020. The network currently has 25 organizations consisting of women's networks and community-based organizations across the country who work with the most marginalized communities of women.



### Hygiene and health

**The water shortage** in vulnerable regions like Sunamgonj and Shatkhira poses challenges to women who are responsible for collecting water for basic hygiene practices including frequent hand washing and shower. Women now have to spend extra time collecting water. In urban slums also, women lack access to clean water, and hygiene items (soap, hand-sanitizer, mask, etc.) and the small living quarters make it impossible to apply social distancing.

**SRHR Services** is getting difficult to access, putting pregnant women at risk.

**Mental Health at risk** with increasing number of women experiencing more mental stress. Fear of the virus coupled with financial stress and increased burden of care work at home are making women feel anxious and helpless.



### Gender based violence incl domestic violence

**Domestic Violence and disputes in the family are on rise resulting from lockdown.** The underlying unequal gender power relations compounded by financial stress is resulting in physical and mental violence by frustrated partners and family members directed at women.

**Lack of access to information on GBV hotlines and shelters** that they can go to are leaving women with few options to escape the violence.

**Physical violence and exploitation** by law enforcement agencies being subjected on floating sex workers and transwomen for being on the streets during lockdown who need to make a living.

**Cases of GBV are being captured by local news sources** while the national level newspapers are no longer reporting GBV cases to the same extent.



### Access to relief and support

Food distribution is mostly taking place in urban and suburban centers mostly at district levels and is not yet reaching enough women at the grassroots level- at upazila and union levels; particularly in char, river erosion and Haor areas.

**Indigenous communities** like Bede, Bonojibi, Munda, the Bihari, marginalized groups e.g. sex workers, gender diverse persons, cleaners and sweepers face discrimination in getting relief support due to language, cast, diversity and having no proof of identity.

**Voter ID registered in a different location bars relief support.** Working women like garment workers, sex workers, migrant domestic workers who are not registered voters where they are currently residing are denied local relief support which is based on presentation of a valid voter ID. From being forced to be in the forefront of relief collection by husbands, to facing discrimination and stigmatization in accessing relief as GBV survivors, women are facing multiple layers of challenges at home and outside.



### Loss of livelihood

Stay-at-Home orders and the resulting suspension of economic activities is severely impacting women who are disproportionately engaged in informal jobs such as domestic work, sex work, street cleaning and micro-businesses. These women are not covered by pre-existing social assistance measures and do not know how to access assistance now. This is even more challenging for women single heads of households.

**Numerous RMG workers have been laid off and have not been paid their full salary.** Many of them are single mothers, pregnant and lactating mothers. They receive no special consideration from the government or factory owners.

**Employment lay-offs** are causing further distress and abuse in the homes.

## Appeals and requests from women leaders, women's networks and organizations



### 1.Gov-NGO Partnership and Consultation

1. Community-based organizations and NGOs are ready to work with Government and local authorities to help reach different pockets of the community and ensure inclusion of women and girls, especially the most marginalized ones, in the COVID19 response.
2. Women's organization and civil society gender advocates want to see MOWCA's active engagement in COVID response to advocate for women and protect their rights.
3. Government and development agencies should regularly consult women and other vulnerable groups for planning and implementation of COVID-19 response, and engage women leaders, women's networks and organizations in prioritization and decision-making processes for COVID-19 response



## **2. Access to Basic Services and information**

1. Access to safe water supply should be ensured in urban areas as well as the water scarce coastal districts so that women, girls and other vulnerable groups can engage in frequent hand washing, cleaning and other hygiene practices and are not overburdened with increased demand for water which requires them to spend extra hours collecting water.
2. Continue provision of essential health services for women, including access to SRH and mental health services.
3. Wider and coordinated dissemination of COVID-19 related prevention and response messages to protect women and other vulnerable groups. The messages should dispel and undo harmful gender stereotypes and superstitions that impact negatively on women and girls



## **3. Better Access to Relief Services**

1. Ensure transparency in relief distribution process and priority targeting of female headed households, single mothers and the most vulnerable and marginalized communities in the relief activities.
2. Make information on eligibility requirement for government relief easily available to marginalized women through communication channels that are accessible to them and in their language
3. Review and adjust eligibility requirements such as voter ID requirements which exclude some of the most vulnerable women.



## **4. GBV prevention and response**

1. Ensure that functioning referral mechanisms and GBV hotlines adjusted to the movement restrictions related to COVID are available in each district.
2. Make sure that hotline operators are trained to providing rights-based and survivor-centered guidance and instructions
3. Helpdesk for legal support at Upazilla level with a centralized monitoring mechanism.
4. Shelter homes need to be available to take in women who cannot stay in their homes. Specific guidelines, protocols and equipment need to be made available to help service providers run COVID-safe shelter homes.
5. Information about the GBV and psychosocial support services of MOWCA and other organizations and NGOs need to be disseminated more widely in accessible format.
6. Raise awareness of the risks of sexual exploitation and abuse (SEA) by aid and service providers and ensure that all aid service is free from all forms of violence.

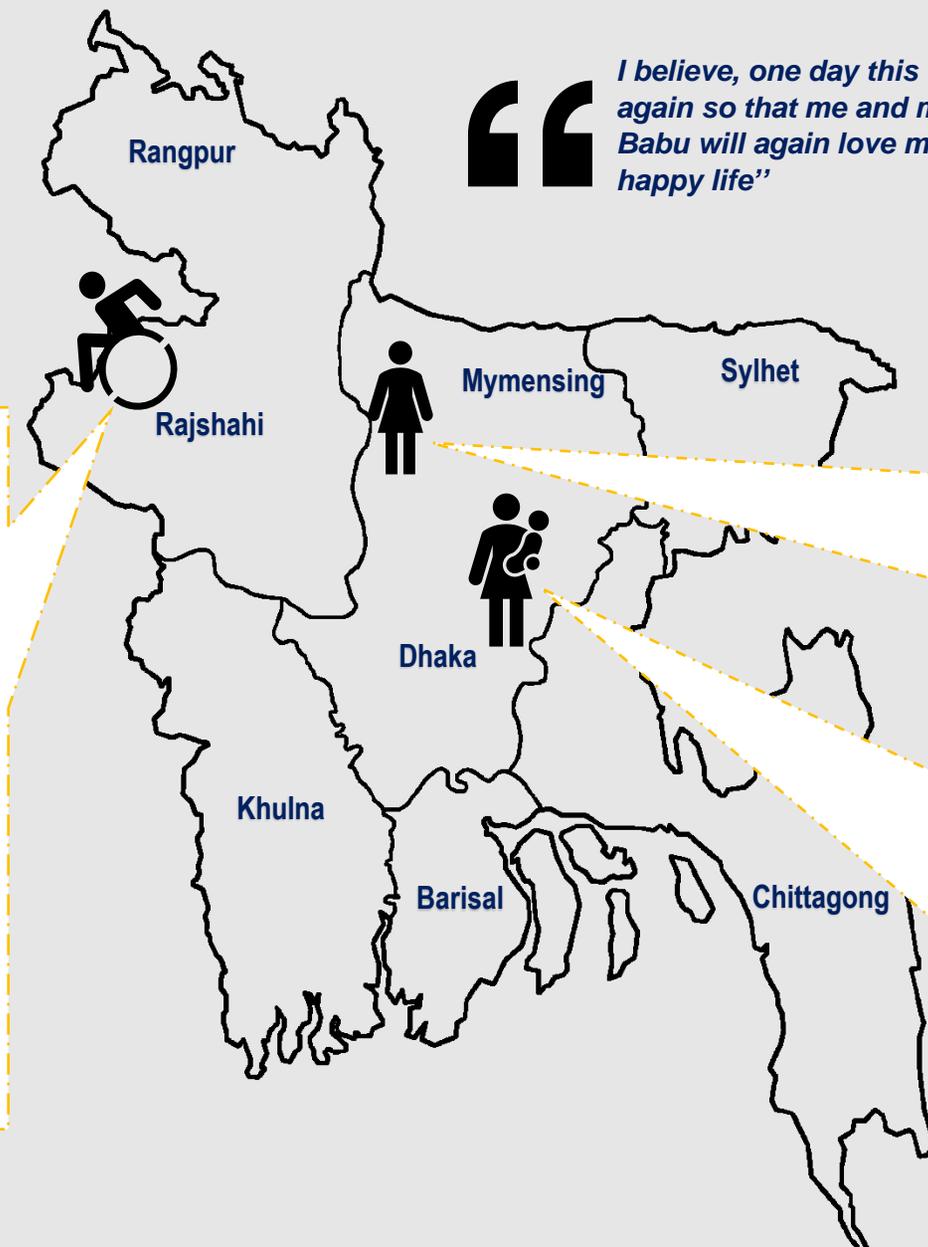
## Hear from the voices of women<sup>1</sup>

“

*Corona brought starvation to my children, and I face violence from my husband even more now”*

### **Rabeya, 24- domestic worker with disability, Bagura**

Rabeya has a disability. She supports her child and husband, a drug addict, through income she earns as a domestic worker. She has been married for 10 years to her husband who emotionally and physically abuses her, and the family is continuously in financial hardship. She lost her job because of COVID-19, and her physical disability makes it difficult to earn livelihood by any other means. She received 5 kg of rice as relief from a local man, but that has been all that she has been able to receive. She passes her day in starvation with her children, enduring the escalating violence by her husband.



“

*I believe, one day this will be over and I can start working again so that me and my family will have enough food. My Babu will again love me as before and we will enjoy a happy life”*

### **Rita, 22- brothel based sex worker, Tangail**

As COVID-19 hit, Rita lost clients and hence her income that used to feed her family of 4 back in her village. Rita and her Babu (lover of a sex worker) used to support each other financially, but because of the crisis, her Babu – a shopkeeper – has also lost his income. He now torments Rita for failing to support him. Rita is worried that he may start beating her if this continues.

### **Laboni, 35- RMG Worker, Dhaka**

Laboni started working in an RMG factory when her husband abandoned both her child and her without paying any alimony. With sudden closure of her factory due to COVID-19 lockdown, she only received half of her salary of 8000 taka. After paying the house rent, she is left with no money to buy food. When she heard about the relief distribution at her area, she contacted the Ward Commissioner office. But she was denied of a relief card as her national ID mentions her permanent address instead of local address and she is also not an enlisted voter in that ward. With no food in her home, she is living on the mercy of her neighbors currently.

<sup>1</sup> Pseudonyms have been used to protect anonymity of the GBV survivors.

## Gender Monitoring Network coverage across divisions

Outreach<sup>2</sup> of Gender Monitoring Network agencies across the divisions of the country, with the help of their partner organizations at District, Upazila and Union levels.

Gender Monitoring Network organizations <sup>3</sup>	Dhaka	Chatto gram	Khulna	Rajshahi	Mymen singh	Rangpur	Barisal	Sylhet
Awaj Foundation								
Bandhu								
Bangladesh Mahila Parishad								
Bindu								
Christian Aid								
Grameen Alo								
Jaago Foundation								
Karmanir Shamajik Mahila Unnoyon Shongstha (KSMUS)								
Lighthouse								
Manusher Jonno Foundation								
Nagar kunjo								
Naripokkho								
Prottoy Unnayan Shongstha								
Sex Worker's Network								
Women with Disabilities Development foundation								

<sup>2</sup> The shaded coverage is not indicative of the organization's operation across the entire division per se, but representative of their operations at district and union levels under each division.

<sup>3</sup> Other organizations part of the network, whose information are yet to be collected are: Action Aid, BLAST, Bangladesh Nari Sramik Kendra, CDD - Centre For Disability In Development, FEM, Leaping Boundaries, Nari Uddyog, Nijerai Kori, SPARC, We CAN Alliance