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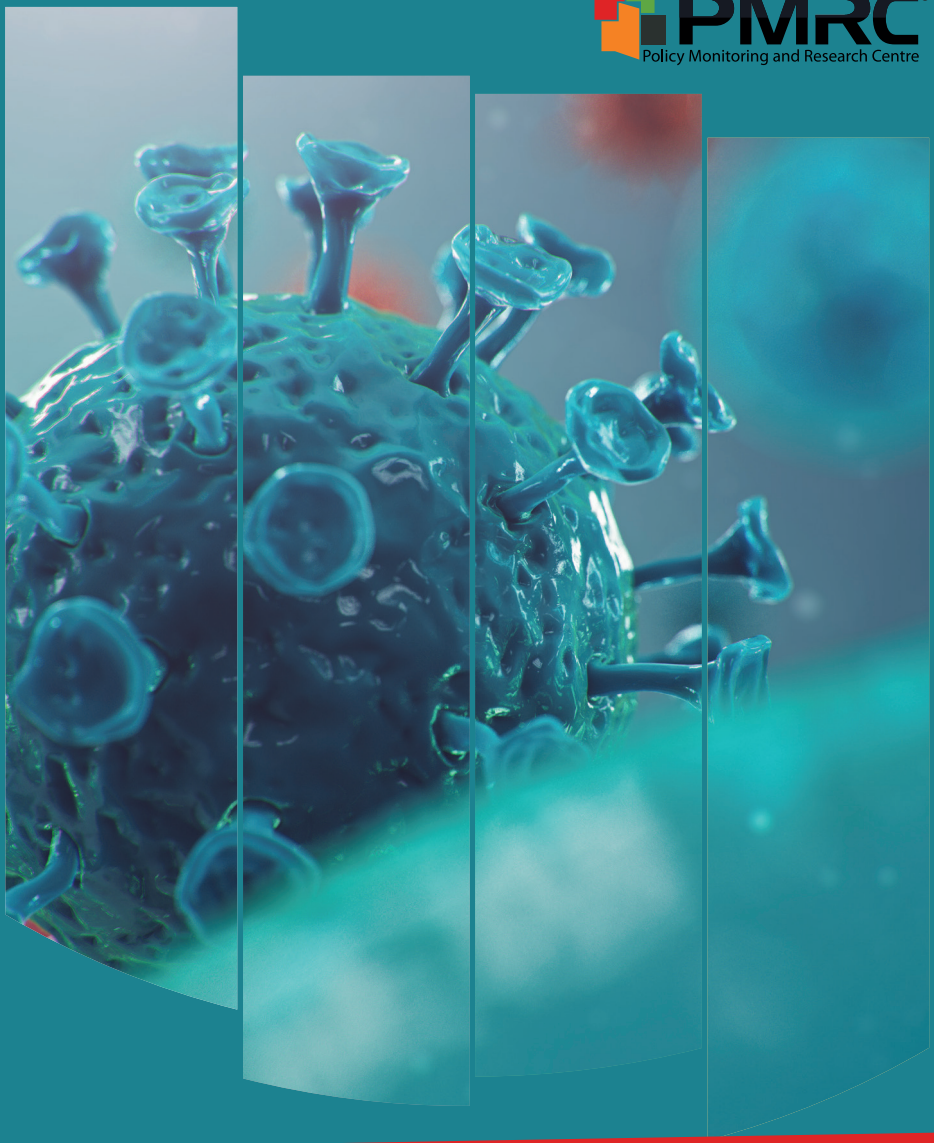

GENDERING THE IMPACTS OF COVID-19

EQUITABLE POLICY RESPONSES FOR ZAMBIA

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BRIEFING DOCUMENT

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BACKGROUND

The onset of the COVID-19 pandemic raised global panic and fear, particularly for low-middle income countries such as Zambia as this affected trade and mobility due to the restrictions that were imposed is order to avert the spread of the virus. This also led to unprecedented loss of; not only life, but incomes and livelihoods especially among the already poor and vulnerable sections of society. As the cases of people that had contracted the virus begun to rise in Zambia, the reality of the measures put in place to contain COVID-19 became eminent; unsettling several sectors of the economy such as those in the tourism and hospitality arena, hence businesses such as bars, restaurants, gyms and casinos had to shut-down in order to minimise social interaction which directly contributed to the spread of the virus. Similarly, those operating in the informal economy such as market traders were negatively impacted since people avoided going to crowded places. Consequently, some business closed entirely or had to scale-back in order to stay afloat, resulting in loss or a significant reduction in household incomes. This had a trickled down negative effect on the economy, resulting in an increase in the cost of living, therefore, heightening levels of vulnerability and more importantly leading to changes in the livelihoods of individuals at household and community level.

Pandemics have differential impacts in society, the experiences of women and girls vary significantly due to their socio-economic positionalities[1]. COVID-19 has the potential to increase negative social vices such as intimate partner violence, stigma and discrimination as well as unequal access to information, financial and social protection and access to sexual and reproductive health services. The impacts of crises are never gender neutral, and COVID-19 is no exception. Thus, it is recommended that **global and national strategic plans for COVID-19 preparedness and response must be backed by strong gender analysis and must ensure meaningful participation of affected groups, including women and girls, in decision-making and implementation**. Also, COVID-19 revealed the deep-rooted socio-economic vulnerabilities that exist due to gender inequality and how they are further perpetuated during times of crisis, particularly, among women and girls. This briefing document seeks to highlight these vulnerabilities and how they impact women and girls, particularly, on their voice and social power as well as highlight strategies for the development of gender-responsive policies during times of crisis.

GENDERED IMPACTS OF COVID-19 ON WOMEN AND GIRLS

a. COVID-19 and the Increase in Women's Double Burden

Traditional gendered roles entail that women should be largely responsible for education and child care even when both parents are available for these tasks. When COVID-19 led to the closure of schools, **this meant that women had to take up the primary role to facilitate the education process of children learning from home regardless of their work status.** A study[2] revealed that women continued to absorb most of the additional caring and schooling of children, particularly when their partner did not work from home. Despite the flexibility in work schedules and working from home, division of labour in the home still remained highly gendered[3] , with women's unpaid care work increasing significantly.

Although, the double burden on women resulting from COVID-19 extended among majority of women, their experiences of it was different because of their individual socio-economic positions. Dunatchik et al. (2021) suggests that gender differences in housework and child care responses to the pandemic were particularly acute among employed parents. **It was also found that these additional responsibilities created by the pandemic affected employed mother's more, whether they were in the formal or informal sector in comparison to unemployed women as father's continued to be far less involved in the care responsibilities of the household in spite of their flexible working conditions.**

1. UNWomen. (2020). From insights to action: gender inequality in the wake of COVID-19. https://reliefweb.int/sites/reliefweb.int/files/resources/From%20insights%20to%20action%20-%20Gender%20equality%20in%20the%20wake%20of%20COVID-19.pdf

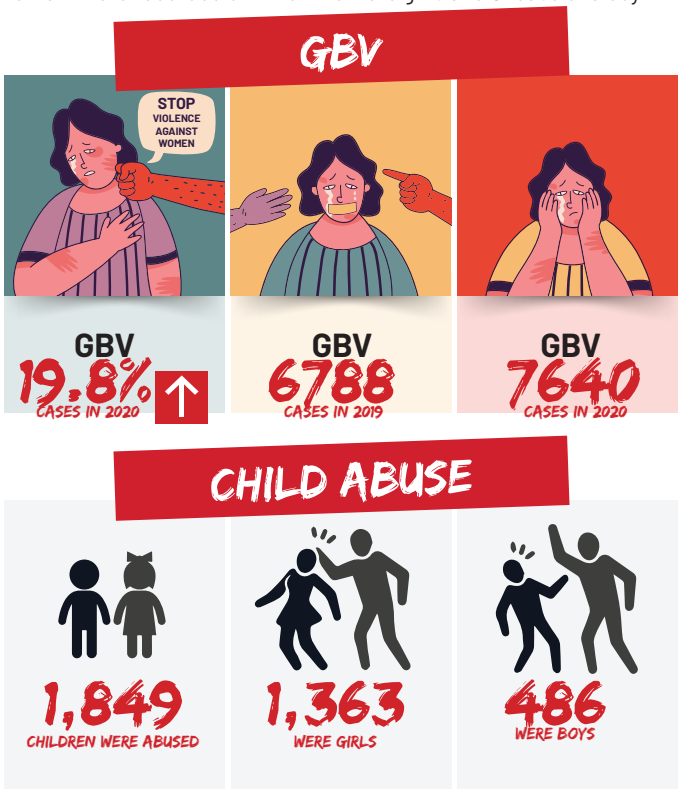
2. Mooi-Reci, I. & Risman, J. B. (2021). The Gendered Impacts of COVID-19: Lessons and Reflections. https://journals.sagepub.com/doi/10.1177/08912432211001305

3. Dunatchik, A., Gerson, K., Glass, J., Jacobs, A. J., & Stritzel, H. (2021). Gender, parenting and the rise of remote work during the pandemic: implication for domestic inequality in the United States. https://journals.sagepub.com/doi/full/10.1177/08912432211001301

b. COVID-19 and Gender Based Violence

COVID-19 played a significant role in perpetuating existing inequalities and vulnerabilities. As the pandemic worsened, economic and social stress coupled with restricted movement and social isolation measures, Gender-Based Violence (GBV) was reported to be on the increase. Statistics indicated an **increase in GBV cases** in the third quarter of **2020 by 19.8%** from **6788 cases in 2019 to 7640 in 2020.** Disaggregated data indicated that **1,849 children were abused within this period out of which 1,363 were girls representing 74% while 486 were boys representing 26%** of all abused child victims respectively.

Among adult victims, women recorded 4,425 cases and 1,366 cases among men representing 58% and 18% respectively. Under sexual abuse, 832 cases of sexual offences were recorded representing 11% of all the reported cases. Out of the 832 case, it was reported that 741 victims were girls translating to 89%, 67 victims were women translating to 8%, 23 victims were boys translating to 3%, whilst 1 victim was a man translating to 0.1%. A total of 714 cases of child defilement were recorded of which 713 were girls and 01 case of a boy[4].



4. Lusaka Times. Cases of Gender Based Violence have risen by 19.8 % in Zambia this year. (November 9, 2020). https://www.lusakatimes.com/2020/11/09/cases-of-gender-based-violence-have-risen-risen-by-19-8-in-zambia-this-year/

ADULT VICTIMS

4,425
WOMEN CASES
REPRESENTING 58%

1,366
MEN CASES
REPRESENTING 18%

SEXUAL ABUSE

832
CASES OF SEXUAL OFFENCE
REPRESENTING 11%

741
WERE GIRLS
REPRESENTING 89%

67 WERE WOMEN
REPRESENTING 8%

23 WERE BOYS
REPRESENTING 3%

1 WAS A MAN
REPRESENTING 0.1%

CHILD DEFILEMENT

714
CASES
OF CHILD DEFILEMENT

713
WERE GIRLS

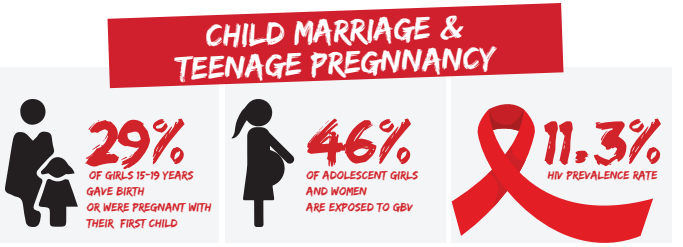
1
WAS A BOY

This could be attributed to the increased time spent at home and frustrations from the loss of income which could have led to increased cases of GBV and risk to abuse resulting from heightened tension in the household, hence putting the lives of women and girls who may have already been victims of GBV to increased risk with limited opportunities to disengage from an unsafe environment. Similarly, **the separation of children from caregivers due to quarantine, hospitalisation or even death increased children's vulnerability to physical and sexual violence, neglect, psychosocial distress and complete loss of household income resulting from the loss of a caregiver.** These factors have the potential to evoke risky coping strategies such as engaging in transactional sex as a means of survival.

The Zambia Police observed that during the initial stage of the pandemic, victims of GBV were hesitant to report cases due to misinterpretation of some COVID-19 preventive measures such as the Social Distancing and Stay at Home campaigns. Notably, a breakdown in service provisions during this period could have led to limited access to sexual reproductive health information and services as well as psycho-social support for victims of violence since health service providers were overburdened with handling COVID-19 cases. Consequently having a negative impact on the health outcomes of women and girls. A rapid assessment[5] revealed that many women felt forced to 'lockdown' at home with their abusers and at the same time services to support survivors were being disrupted or made inaccessible. It is was therefore critical to update platforms for key communities to continue accessing mental health and relevant psycho-social support[6]. In responding to this need, the Zambia Police Service has been working closely with cooperating partners in providing support to victims of crime as part of the COVID-19 response and in ensuring that victims of GBV continue accessing essential services.

c. COVID-19 and Teenage Pregnancies

Zambia has one of the highest **child marriage and teenage pregnancy** rates globally. According to the Zambian Demographic Health Survey (2018), **29% of girls aged 15-19 years have already given birth or were pregnant with their first child.** Over **46% of adolescent girls and women are exposed to GBV** with an **HIV prevalence rate of 11.3%** among **females aged 15- 49 years.** Given the increased vulnerability of women and girls resulting from the socio-economic challenges of COVID-19, safeguarding the lives of vulnerable groups is critical in order to cushion the shocks of coping with effects of the pandemic.



5. WaterAid. (2020). Rapid COVID-19 vulnerability assessment in Lusaka (Zambia). https://washmatters.wateraid.org/sites/g/files/jkxoof256/files/rapid-covid-19-vulnerability-assessment-lusaka-zambia.pdf

6. UNFPA (2020). COVID-19: A gender lens protecting sexual and reproductive health and rights, and promoting gender equality. Technical Brief. https://zambia.unfpa.org/sites/default/files/pub-pdf/COVID-19_A_Gender_Lens_Guidance_Note%20%281%29_0.pdf

According to an assessment conducted by **Zambia National Education Coalition (ZANEC), 565 girls had dropped out of school due to pregnancy while 185 girls dropped out due to child marriages.** These findings could also be an indication of the adoption of negative coping mechanisms such as transactional sex, sexual exploitation and increased child marriages which are an eminent threat and could worsen the high HIV prevalence in the country. Further, the singular concentration on COVID-19 created challenges for young girls to access sexual and reproductive health services and information.

d. Increase in Poverty, Loss of Jobs and Livelihoods

Women already in situations of poverty and high vulnerability to social exclusion bore the worst brunt of the effects of the pandemic, particularly, the elderly, persons with disabilities and children. Many women and other vulnerable groups, including people with disabilities, work in the informal sector with limited opportunities to access social security and live in poverty. They also have no savings or access to financial services and an independent source of income hence were faced with significant risks to the social and economic shocks in the wake of the crisis.

Estimates suggest that the informal sector employs about **87.5%** of workers with about **11.3% working in the formal sector in Zambia.** Additionally, about **91%** of women are captured in the informal sector against **87.5% of men**[7]. These typically consist of domestic workers, street vendors, daily labourers who rely on 'hand to mouth' for their livelihood, thus the disruptions caused the pandemic heavily impacted their survival and quality of life.

The loss of income, jobs and livelihoods became a reality for a number of households and entrepreneurs. A survey to assess the impact of COVID-19 on women-led enterprises found that more than 86% of women-led firms recorded a decrease in sales with nearly 93% reporting a decrease in liquidity and cash flow[8].

Not only does COVID-19 expose women's precarious economic position and security particularly in the sectors that are considered **'feminine'** such as the care and hospitality sector as they have been the most affected, the economic impacts are likely to have long term effects on the livelihoods of women and vulnerable groups, especially those in the informal economy. This can be attributed to lowering wages and casualization of work in order to sustain businesses from the impacts of the crisis on trade.

Reduced household income also meant that the family had to scale-back on essentials such as nutritious meals. In an attempt to safeguard the livelihoods of vulnerable populations the Zambian Government and its supporting partners such as the World Food Programme (WFP) launched the emergency COVID-19 social cash transfer meant to mitigate the negative economic hardships that marginalised sections of society such as persons with disabilities could have been facing resulting from the pandemic. However, this programme was only

7. ILO (2019). Informality and Poverty in Zambia: Findings from the 2015 Living Conditions and Monitoring Survey. https://www.ilo.org/wcmsp5/groups/public/—africa/—ro-abidjan/—ilo-lusaka/documents/publication/wcms_697953.pdf

8. Qursum Qasim (2020). Navigating a new Zambia: Women-led SMEs and COVID-19. https://blogs.worldbank.org/nasikiliza/navigating-new-zambia-women-led-smes-and-covid-19

launched on 28th July 2020 while the impact of the pandemic had already begun to be felt as early as March 2020. The programme was targeted at vulnerable households with children, the elderly and women. The package would not only be in form of cash (K400 monthly) but would also include food supplies for at least six months. The temporal intervention targeted 22 districts across the country with 204,000 beneficiaries. This was a critical intervention in addressing some of the challenges faced by vulnerable households, particularly, for those with disabilities whose livelihoods may have been disrupted during the pandemic [9].

The Implication of Gendered Inequalities on Women's Voice and Social Power

A loss or reduction in women's income and livelihoods consequently impacts their agency and decision making at household and community level. This has the potential to heighten their vulnerability and exposure to incidences of violence and abuse because they have inadequate financial capacity to respond to the economic shocks induced by the pandemic. **Since the effects of COVID-19 were not equally distributed and various factors such as age, gender, socio-economic status, disability status as well as location converged to impact women and girls differently, their social power and agency was therefore eroded.** They had limited capacity to influence decisions on issues that affected them and their communities. Hence, there is need to strengthen gender-sensitive policy responses to avert the impacts of pandemics such as COVID-19. This can be done through bolstering social protection and social security programs in times of crisis in order to assist the most vulnerable of society, particularly, women, children and persons with disabilities to support decent livelihoods and build resilience to avert negative coping strategies that have an impact on their health and wellbeing.

Strategies for gender-sensitive policy responses during times of crisis

- Policy markers are urged to consider how various inequalities can converge during times of crisis such as COVID-19 resulting in differentiated impacts among women and men, particularly those most excluded such as those living in poverty, persons with disabilities, the aged, internally displaced persons or refugees who tend to face intersecting and multiple forms of discrimination must be addressed.

- Government is urged to prioritize the collection of accurate and disaggregate data by age, gender, location and vulnerability status in order to design programs that are responsive to the needs of different populations during a crisis such as COVID-19.

- PMRC urges Government to ensure the response to COVID-19 does not reproduce or perpetuate harmful gender norms, discriminatory practices and inequalities. It is important to recognize that social, culture and gender norms, roles, and relations influence women's and men's ability to adapt to socio-economic shocks.

9. UNICEF. (2020). COVID-19 Emergency Cash Transfer: factsheet. https://www.unicef.org/zambia/media/2106/file/Zambia-COVID19-factsheet.pdf

- PMRC urges Government to ensure policies and interventions are deliberately targeting women and girls in order to design gender responsive policy measures in social protection programs.
- Government is urged to strengthen the efficiency of social protection responses to crisis in a timely and predictable manner. This can be done by constantly addressing challenges in the implementation of social protection programs in order to provide timely assistance.
- There is urged to increase the buying power of social cash transfers in order to effectively mitigate the shocks to vulnerability by incorporating inflationary price index in the design of social protection programs.
- Policy markers are urged to ensure policies and interventions around response speak to everyone's needs at the same time. Prioritizing the protection needs of women and girls must be at the centre of response efforts.
- There is need to prioritize women's participation and incorporate the voices of women as their roles within communities typically place them in a good position to positively influence the design and implementation of social protection programmes and policy interventions.
- Stakeholders are urged to support meaningful engagement of women and girls at the community level to ensure efforts and responses are not further discriminating and excluding those most at risk.

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