



COVID-19 and Gender-Based Violence Globally: U.S. Government Response Must Address Gender-Based Violence

COVID-19 has already had undeniable impacts on women, girls, and others around the world, including gender-based violence. In just the first few weeks of the crisis, communities globally – including in the United States – have witnessed an increase in gender-based violence (GBV) such as intimate partner violence while struggling with the loss of traditional safety networks, resources, and services. The physical, mental and social impacts of GBV are not only personal to the victim but also have the potential to hinder emergency response efforts and may impede long-term recovery.

The U.S. Government should take all available measures to ensure that preventing, mitigating, and responding to gender-based violence is a priority in all global COVID-19 responses. We call on the U.S. Government to:

- Ensure adequate funding to address gender-based violence
- Support program measures that integrate GBV prevention and mitigation
- Ensure U.S. Government programs are based on a gender analysis and collect sex- and age-disaggregated data
- Prioritize women-, girl-, and community-led solutions and knowledge

Levels of gender-based violence are rising due to COVID-19. One in three women experience physical or sexual violence during the course of their lives;ⁱ during crises such as COVID-19, that type of GBV increases to even more staggering levels.ⁱⁱ The stress and disruption caused by crises exacerbate underlying norms that lead to acts of domestic violence. Violence is heightened when movement is restricted under movement restriction orders or incomes are disrupted, forcing victims to remain trapped with or dependent on their abusers. Since the outbreak of COVID-19, reports of domestic violence in China, for example, tripled compared to the previous year.ⁱⁱⁱ France reported an increase of 30% in reports of domestic violence^{iv}; in Colombia, emergency calls have increased by 90%.^v

The drivers of gender-based violence during crises are increasingly complex, and already marginalized groups will be disproportionately impacted. The Ebola pandemic demonstrated^{vi} that violence such as child marriage, trafficking, and sexual exploitation and abuse can surface due to complex underlying social norms in emergencies. Identifying and addressing such GBV becomes dually difficult for already marginalized groups, such as adolescent girls or those with disabilities. Adolescent girls may face an increased risk of child marriage due to a number of COVID-19 related factors, including the current disruption to their education, their families' economic hardships, increased levels of teenage pregnancy, or the belief that daughters' futures will be more secure in marriage. Similarly, economic hardship, isolation, and other vulnerabilities such as age or disability can expose women, girls, and others to sexual exploitation and abuse perpetrated by aid workers.

Critical programs to support women and girls – which are already under-resourced – are disrupted during global pandemics. Women's and girls' needs for services – including for gender-based violence and health care – are likely to increase as the accessibility of these services declines.^{vii} GBV response and prevention services, particularly in the health sector, may be weakened when not deemed “essential” as already

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limited resources and supplies are diverted to fund infection control and treatment. Even where basic essential services are maintained, a collapse in a coordinated response between different sectors such as health, police, justice, and social services response, as well as a general overburdening of health systems will mean that sectors will be challenged to provide meaningful and relevant support to women and girls who are experiencing violence.^{viii}

Global pandemics dramatically worsen humanitarian crises and exacerbate existing gender inequities in these contexts. Humanitarian crises already have a unique impact on women and girls, such as heightened exposure to gender-based violence.^{ix} As efforts are redirected towards COVID-19 response, already displaced women and girls face decreased access to protection and health services and increased dependency on aid workers or abusive partners, leading to greater vulnerability to exploitation and abuse. The challenges of COVID-19 provide additional strain layered on top of already complex circumstances in humanitarian situations: insecurity, displacement, and weakened health infrastructures.

Recommendations

To ensure the U.S. Government addresses the severe impacts of COVID-19 globally, we urge Congress and the Administration to adopt specific measures that prevent, mitigate, and respond to the disproportionate effect COVID-19 will have on women, girls, and other survivors of GBV globally, including:

Ensure adequate funding to address gender-based violence

The U.S. should commit specific funds that respond to the pandemic globally and support initiatives that are gender- and age-sensitive, flexible, and address the immediate and long-term GBV impacts of the COVID-19 crisis on women and girls.

- Congress should ensure that future COVID response bills integrate specific funding to prevent, mitigate, and respond to gender-based violence globally. This should include continued funding for existing GBV programs, funding for new GBV programs to address the rising rates of GBV as a result of COVID-19, and funding for operating expenses and expertise to ensure the integration of GBV elements across COVID-19 programs are effective.
- Recognizing that GBV is a critical global health concern, U.S. funding for health responses to COVID-19 should ensure GBV prevention and mitigation is included as a lifesaving measure.
- The U.S. should provide a humanitarian exemption for funding to UNFPA. UNFPA's presence and expertise in managing GBV prevention, mitigation, and response make it a key actor in ensuring critical services and supplies reach the communities that often face the greatest barriers to care, including in humanitarian settings.
- Congress should pass Appropriations for FY2021 that support robust investments in gender equality and maintain the International Affairs Budget at no less than the current enacted level.

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Support program measures that integrate GBV prevention and mitigation

U.S. Government programs should advance efforts to integrate GBV prevention, mitigation, and response into health, protection, economic recovery, food security, cash transfer, and other sectors related to COVID-19, such as:

- Ensuring that mechanisms such as domestic abuse hotlines and services for survivors of GBV are considered “essential services” and are fully resourced. This includes, but is not limited to, the clinical management of rape, mental health and psychological support, and referral to other services, including case management;
- Equipping health care workers, including community health workers, to identify and respond to gender-based violence, or refer survivors to appropriate services;
- Prioritizing the use of technology and other remote options to maintain contact with and/or support survivors of violence when movement or access is restricted.
- Integrating prevention of sexual exploitation and abuse committed by aid workers or others providing response services into all programs, including prioritizing appropriate training, monitoring, and accountability mechanisms.
- U.S. funding and partnerships should ensure that frontline workers, including those providing in-person services to address GBV, have the personal protective equipment (PPE), training, and other safety measures needed to safely provide essential services during the pandemic.

Ensure U.S. Government programs are based on a gender analysis and that sex- and age-disaggregated data is collected

Complete and consistent data and analysis is needed to fully understand the impact of COVID-19 on women and girls and inform the response.

- All U.S. global response to COVID-19 should be informed by a gender analysis and “do not harm” approach so that programs and policies do not perpetuate harmful gender norms, discriminatory practices, or inequalities.
- U.S. COVID-19 response efforts should include the systematic collection, analysis and use of sex- and age-disaggregated data to increase understanding of how COVID-19 impacts genders differently.
- The U.S. should support the collection of disaggregated data on the incidence and types of violence against women and girls during and after the COVID-19 pandemic, and data on the needs and capacity of GBV services to respond to increased demand in the context of COVID-19.

Prioritize women, girls- and community-led solutions and knowledge

Women and girls should be actively included in all aspects of policy change, solutions, and recovery initiatives in relation to the pandemic.

- U.S. foreign assistance funding and programming to prioritize women's and girls' safe and meaningful leadership and participation in shaping and delivering the COVID-19 response. This means proactively ensuring their participation in decision-making bodies and active involvement in the design and evaluation

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of programs and taking special measures to reach especially marginalized groups like adolescent girls, women and girls affected by conflict, and women and girls with disabilities.

- U.S. funding and programming to ensure support for grassroots women’s rights organizations and girl-led networks responding to COVID-19 and to GBV, many of which are already present and active in impacted communities.
- The U.S. government to advocate for governments to better partner with civil society organizations and lead efforts to prevent, mitigate, and respond to GBV during and after the pandemic.

ⁱ UN Women. “Facts and Figures: Ending Violence Against Women.” November 2019. <https://www.unwomen.org/en/what-we-do/ending-violence-against-women/facts-and-figures>

ⁱⁱ UN Women. “The Shadow Pandemic: Violence Against Women and Girls and COVID-19.” March 2020. <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/issue-brief-covid-19-and-ending-violence-against-women-and-girls-infographic-en.pdf?la=en&vs=5155>

ⁱⁱⁱ Axios. “China’s Domestic Violence Epidemic.” 7 March 2020. <https://www.axios.com/china-domestic-violence-coronavirus-quarantine-7b00c3ba-35bc-4d16-afdd-b76ecfb28882.html>

^{iv} Euronews. “Domestic Violence Cases Jump 30% During Lockdown in France.” 28 March 2020. <https://www.euronews.com/2020/03/28/domestic-violence-cases-jump-30-during-lockdown-in-france>

^v Americas Quarterly. “Tracking Latin America’s Other Pandemic: Violence Against Women.” 13 April 2020. <https://www.americasquarterly.org/content/tracking-latin-americas-other-pandemic-violence-against-women>.

^{vi} UN Women. “COVID-19 and Ending Violence Against Women and Girls.” March 2020. <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/issue-brief-covid-19-and-ending-violence-against-women-and-girls-en.pdf?la=en&vs=5006>

^{vii} UN Women. “Women and COVID-19: Five things governments can do now.” 26 March 2020. <https://www.unwomen.org/en/news/stories/2020/3/news-women-and-covid-19-governments-actions-by-ded-bhatia>

^{viii} UN Women. “COVID-19 and Ending Violence Against Women and Girls.” March 2020. <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/issue-brief-covid-19-and-ending-violence-against-women-and-girls-en.pdf?la=en&vs=5006>

^{ix} UNFPA. “Gender-Based Violence in Humanitarian Settings.” December 2014. <https://www.unfpa.org/resources/gender-based-violence-humanitarian-settings>

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