



### **A gender perspective on COVID-19**

The obvious question a gender expert in this time would ask is if the impact of the COVID-19 pandemic is gender neutral. Does it affect men and women equally or differently so that, we are not gender blind in our responses or overlook some important aspects while working out solutions. COVID-19 outbreaks may affect women and men differently and may exacerbate existing inequalities for women and girls. Moreover, learnings from the past suggest that some disease outbreak may affect the sexes differently and it is still unknown that how the risk level from Covid-19 among women changes during pregnancy. Gender inequities may make the crisis even worse and therefore integrating gender analysis into the response will have a far reaching impact. Gender integrated response should recognize how socially-constructed roles and identities affect vulnerability and proposes the strategy to minimize those vulnerabilities.

The extra economic and social stresses caused by a radical shift away from normal life would disproportionately increase vulnerabilities of women. With families facing job loss, delayed wages, or other economic insecurities, women and girl members would mostly be at the receiving end of this unwarranted situation. Unlike regular recession, social distancing measures would more adversely affect sectors having high female employment such as schools, child day care, hospitalities etc. Those who are dependent on daily wage livelihoods face innumerable challenges in managing their households under these extreme scarcity situations.

The nation-wide lockdown has forced entire family to be at home all day and with the children unable to attend school, women and girls would most likely face additional cooking demands along with the extra work of disinfecting and cleaning homes. Besides, they also have to take special care of the elderly family members or members who may fall sick. Women take on the majority of the burden and risk of providing health care in the home while their hardships related to sacrificing their own health and safety often go underreported. Therefore during outbreak periods like Covid-19, women may be absorbing the burden of family-care at the cost of self-exploitation.

There may be a rise in domestic violence due to the lockdown as abusers may take advantage of isolation measures knowing that women will be unable to call for help or escape. The rise in domestic violence, post lockdown, had started trending on the national news channels. Lack of access to alcohol, tobacco products etc. among addicts may incite them to frequently abuse their wives and children during lockdown. Civil society organizations, unable to operate currently, may not be able to come to their rescue. Similarly, law enforcement agencies being heavily occupied in the current scenario, may also find it difficult to pay heed to these cases. Access to vital sexual and reproductive health services would be compromised as resources would be diverted to respond mostly towards managing the outbreak. Consequently, the maternal mortality rate which is already high in India may increase further.

The intention of raising these seemingly odd questions in the midst of the outbreak is to gear up the system to consider these challenges and strengthen the effectiveness of responses. Failure to include gender in an outbreak response policy ignores how women, men, and other groups experience outbreaks and responses differently. Policy-makers and outbreak responders need to pay attention to gender-related roles and social and cultural practices to address gender based needs during such crisis. However, gender mainstreaming in outbreak policy will necessitate deep examination of gender disaggregated vulnerabilities during crisis like Covid-19. The learnings emerging from these studies will shape up best practices for responding during any such future outbreak. While forming the policies, it is also important to consider gender mainstreaming within the decision making body of the country. There is an urgency to incorporate gender-based analysis, the voices of women and feminist perspectives, in disease outbreak response plans and policies, not only in India but across the globe.

***(Chandra Shekhar, Sr. Research Analyst, Integrated Research and Action for Development)***