



44th SESSION OF THE HUMAN RIGHTS COUNCIL

Annual full-day discussion on the human rights of women

Panel 2: COVID-19 and Women's Rights

14 July 2020

In this summary:

- **Opening statements, initial presentations** by the distinguished panellists.
- **Interactive discussion** (interventions from the floor for States and observers, national human rights institutions and non-governmental organizations).
- **Responses** to questions and **concluding remarks**.

Chair: **H.E. Mr. Nasir Ahmad Andisha, Vice-President of the Human Rights Council**

Opening statement and Initial presentations:

Ms Peggy Hicks, Director of the Thematic Engagement, Special Procedures and Right to Development Division, Office of the United Nations High Commissioner for Human Rights (*Opening Statement*)

- **COVID-19** has been a magnifying lens on the many negative impacts of **gender inequality**.
- Like in past health emergencies, the current crisis has been accompanied by a surge in **gender-based violence**. The UNFPA estimates that, if the restrictive measures last 6 months, there will be 31 million additional cases of gender-based violence globally.
- Due to movement restrictions and the overload on health systems, there is also a risk that **sexual and reproductive health services** will be reduced and less accessible. Any reduction in availability or access leads to an increase in maternal and newborn mortality, unmet need for contraception, and higher numbers of unsafe abortions and sexually transmitted infections.
- With 60% of the world's **student population** having been affected by closures, girls have been at a higher risk of disruption of their education, child marriages, unintended pregnancies and gender-based violence.
- Women also feel a disproportional impact of the **economic crisis**, due to lack of access to financial and productive resources, precarious forms of employment and their concentration in informal sector. In developing countries 70% of women's employment is in the informal economy.
- Women are often excluded from **decision-making**, including by being underrepresented in the majority COVID-19 national response leadership teams.
- Women who face **intersecting forms of discrimination** are the ones facing the most severe impacts. Women and girls living in **poverty**, or **irregular immigration status**, have much less means to protect themselves from the infection, and from economic shocks.
- Gender equality is fundamental to overcoming crises. **Effective strategies** to build back better while advancing gender equality already exist: the 2030 Agenda, the Beijing Platform for Action and the Convention on the Elimination of All Forms of Discrimination against Women.
- We need to accelerate their **implementation** in a truly comprehensive manner, and to build on **opportunities** that the pandemic is bringing about.
- The crisis has also shown the power of **women's leadership** – with more effective COVID-19 response in many places where women are in charge.
- We must support the work of **feminist movements**, grassroots women organizations and women human rights defenders. We will only overcome this historic challenge through **solidarity, coordination** and **multilateralism**. Always with the equal participation of women and girls.

H.E. Ms. Arancha González Laya, Minister for Foreign Affairs, European Union and Cooperation of Spain (*Opening Statement, by video message*)

- The impact of the pandemic on women and girls is undoubtedly **disproportionate**.
- Women represent **70%** of frontline health workers.



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- Women and girls have experienced **higher rates of violence** during the pandemic.
- Women and girls are severely affected by the difficulty of **access to basic services** derived from the pandemic. Access to health services, especially sexual and reproductive health services, dropping out of school are the urgent challenges that we must address, particularly in the humanitarian context.
- Women must **participate effectively** in all phases of planning and decision-making about the response to COVID19. We must support women's and women's rights organizations that are in many cases endangering their lives to guarantee access to basic services for women and girls.
- No country in the world is exempt from the **pandemic of violence** against women and girls. In countries with records of cases of gender violence, this has increased by 30% on average. More women and girls experience violence in their homes. Sexual violence in humanitarian contexts is on the rise. We need protection services, collection of disaggregated and transparent data, and reinforcing prevention services, help lines and access to reliable information.
- **Economic response** and recovery policies after the pandemic must specifically address the impact on women. The recognition of unpaid care work, the reduction of the pay gap, and fiscal and social protection policies must result in the real economic **empowerment** of women and avoid a further **feminization of poverty**.
- We need more and better **data** to implement truly effective policies.
- Spain is promotion adoption of **resolution** withing the General Assembly on women and girls and Covid. Spain is also leading on **economic justice and rights** during the Generation Equality Forum of Beijing +25.

Ms Editar Adhiambo Ochieng, Founder of the Feminist for Peace Rights and Justice Centre and feminist activist from Kibera informal settlement, Kenya (Video Message)

- Bringing the voice of **grassroots** women.
- The pandemic really hits the world but it also had ripple effects for women and girls in informal settlements. In Kibera, Kenya there are a lot of challenges, including **sexual and gender-based violence**. Every day, there are at least five new cases. Many teenage girls are being raped or defiled by closest relatives.
- A small **community-based organization** seeks to ensure that these women are given a safe space to share their stories, helps these women to report these issues to the authorities like police, takes care of their health, and ensures that they are given psychosocial support during this pandemic. They also seek to ensure decent education for them as well as food for their livelihood.
- **Domestic violence** is also on the rise because of financial constraints, and because a lot of women are domestic workers who lost their jobs.
- **Teenage pregnancy** is another major concern. It can be forced teenage pregnancy, where girls are being raped. Often, girls do not have enough information about sexual and reproductive health. Girls do not have access to safe abortion and many of them have to drop out of school because of pregnancy.
- There are also **economic hardships**. Many women, who generally are the breadwinners, lost their jobs.
- It has been difficult to create **awareness about the Covid-19** in the communities. Being at the frontline in this community, we seek to create awareness on hand washing, ensure that women wash hands with soap and water and the organization provides soap to the community.
- In what relates **reproductive health**, we provide contraceptives to women around Kismondogo area.
- The organisation also provides **portable library** for all children to access books. We want to nurture children with the knowledge, we are trying to change the narratives.

Dr. Natalia Kanem, Executive Director of the United Nations Population Fund (Video Message)

- We must vigorously uphold women's **sexual and reproductive health** and rights during the COVID19 pandemic and address the alarming increase in levels of **gender-based violence** and even **femicide**.
- The situation is urgent. It **affects every country**.
- UN Secretary-General António Guterres called for **Peace in the Home**, a global 'ceasefire' on gender-based violence. Thus far 146 Member States have pledged to make peace in the home a reality. UNFPA appeals to all to join the pledge.



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- Fear of contracting Covid19 or losses of household income may lead **pregnant women** to delay or forgo prenatal care. If they do get to a health post, they may find that the midwife has been redeployed to fight the pandemic, and regular maternal health services are not available.
- **Midwives** face daily exposure to the virus. Many are doing so without the right protective equipment.
- Women account for around 70% of the global **health workforce**. Yet women's specific needs, including on the COVID frontlines, are not being sufficiently provided for.
- UNFPA is providing **personal protective equipment PPE** to midwives, and also family planning services and dignity kits, for women and adolescent girls in refugee and IDP camps.
- UNFPA projects the pandemic could result in **millions more cases of gender-based violence** and with disruption in family planning, millions more unintended pregnancies. Already we see **setbacks** in efforts aimed at preventing child marriage and female genital mutilation, as girls are no longer in school.
- **SRHR** must be part and parcel of essential COVID-19 response plans, and to our efforts to achieve Universal Health Coverage and Agenda 2030.
UNFPA with partners is researching the unique vulnerabilities faced by **older women** living in isolation, the situation of **indigenous** women and girls and those of **African descent**.
- Quality **population data** renders vulnerable people visible. Disaggregated data allows governments to plan and prioritize service provision.
- Through our work with **national statistical agencies**, UNFPA helps countries to map populations vulnerable to COVID-19 and target those most at risk.
- UNFPA's innovative online **World Population Data Dashboard** makes it possible for anyone to map local districts by age, gender, proximity to services and other parameters.

Ms. Jayati Ghosh, Professor of Economics, Jawaharlal Nehru University, India (Video Message)

- Covid19 has affected women as **workers**: both as paid workers, whether in formal or informal work or self-employed; and as unpaid workers. It has affected women who are national and international **migrants**. It has affected the survival needs of women especially in **developing countries**, in terms of access to food and access to health care, including reproductive health. And it has reinforced **relational inequalities**.
- In most countries, many women workers **lost their jobs** or faced reductions in incomes. Many women also dropped out of the labour force because of **childcare** and other domestic responsibilities as schools were shut. This decline in women's paid employment is likely to have a **longer-term impact**.
- Especially in the developing world, women are more likely to be **informal workers**, who have no legal or social protection. In countries like **India**, as many as 98% of women workers are informal.
- Women dominate in **health services**: more than two-thirds of all health workers in 104 countries are women, according to the WHO. They earn 28% less than men, on average, also because they are concentrated in lower-paid occupations. More women health workers are likely to be exposed to infection without adequate protection.
- **Migrant workers**—both within countries and cross-border—are also badly affected by the pandemic. 80% of all female cross-border migrant workers are domestic workers, who are part of a global supply chain of care services. They are likely to be the most exposed and vulnerable.
- The emerging **food crisis** is also a critical area of concern, because when families have less access to food, it is known that women and girls suffer even more. And the **environmental** and **climate crisis** is likely to make these problems even more acute.
- The solutions to these problems require **bold visionary leadership** and an **internationalist spirit**.
- We need a **Global New Deal**—and it must be multicoloured. It requires economic recovery, regulation and redistribution as main elements.
 - o It must be **Green and Blue**. Increased public spending has to be oriented towards: recognising, respecting and preserving the **environment**; reducing carbon emissions, addressing climate challenges and enabling adaptation; and changing patterns of production and consumption accordingly.



o It must be **Purple**, with an emphasis on **care**. This can address future concerns about new technologies taking away jobs, because care work is relational and requires flexible responses, so it cannot be entirely replaced by machines. This requires rewarding paid care and giving care workers greater voice.

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- o It must be **Red**, with a critical focus on addressing and reducing **inequalities** which have to be reduced across different dimensions: gender, race, ethnicity, caste, location, age. This requires more careful regulation of markets, including of financial, labour and land markets, and more active redistribution.
- o All of this requires international cooperation so the **Multicoloured New Deal** must be **Global in scope**.

Ms Phumzile Mlambo-Ngcuka, Executive Director of the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women) (*Video Message*)

- Around the world women continue to face barriers to **political leadership**.
- Worldwide, women hold just 25% of seats in single or lower houses of **parliament**.
- Only 7.2% of **heads of state** and 6.2% of **heads of government** are women.
- Just 24.7% of the world's **Health Ministers** are women while women make 70% of frontline health workers.
- For every three men quoted in COVID-19 **media**, only one woman is quoted.
- At the same time, women leaders have been lauded for their **responses to the pandemic**.
- Women's leadership in the COVID-19 response is especially important given how the crisis is deepening gender **inequality**.
- **Gender-based violence** is increasing — at home and online.
- **Access to justice** and the courts is often compromised.
- The ability to reach **sexual and reproductive health** services is being reduced.
- The **digital divide** is keeping women away from information. Women's **unpaid care** burden is rising.
- Millions of girls are out of school, putting them at greater risk of **child marriage, FGM, unintended pregnancies** and **HIV infection**.
- We risk having a **lost generation of girls** who never return to school.
- Governments have a responsibility to put women front and centre in responding to the pandemic, by:
 - o Ensuring **gender balance** in strategy and decision-making bodies;
 - o Gender mainstreaming response and recovery plans and budgets;
 - o Including national gender mechanisms, gender experts and **women's and feminist organizations**;
 - o Using gender disaggregated **data** and evaluating the gender response.
- Women's **involvement** is crucial in all stages of legislative, policy and budgetary decision-making processes. This may require **temporary special measures**, such as those frequently recommended by the CEDAW committee and in the Beijing Platform for Action.
- Women must also have access to and information about the internet, along with policies that **limit the risk of online violence** against women participating in public discourse.
- A handful of women heads of state and government are showing the world how to find sustainable solutions to the pandemic. We must follow their example and ensure that more women can join them as leaders and role models, during and beyond the pandemic.

Interactive Dialogue

High-level dignitaries: H.E. Ms Marise Payne, Minister for Women and Minister for Foreign Affairs of Australia, H.E. Ms Yvonne Dausab, Minister of Justice of Namibia

States: European Union, Norway on behalf of the Nordic and Baltic countries (Denmark, Estonia, Finland, Iceland, Latvia, Lithuania, Norway, Sweden), Liechtenstein on behalf of a group of states (Austria, Liechtenstein, Slovenia, Switzerland), Denmark on behalf of 56 States (Albania, Argentina, Austria, Belgium, Bosnia and Herzegovina, Botswana, Bulgaria, Canada, Cyprus, Czech Republic, Denmark, Estonia, Fiji, Finland, France, Georgia, Germany, Greece, Italy, Japan, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Mexico, Monaco, Netherlands, New Zealand, North Macedonia, Norway, Panama, Portugal, Republic of Korea, Romania, Spain, Tunisia, United Kingdom, Uruguay), Chile on behalf of a group of states (Argentina, Colombia, Costa Rica, Ecuador, Mexico, Panama, Paraguay, Peru, Uruguay, Chile), Monaco, Ecuador, Qatar, Angola, China, Belgium, Venezuela, Tunisia, India, Iran, Cuba, Brazil, Botswana, South Africa, Netherlands, Greece, Sudan.

Civil Society: Asian-Pacific Resource and Research Centre for Women (*joint statement by 32 organisations*), Women's International League for Peace and Freedom, International Planned Parenthood Federation, (*joint statement*), European Region of the International Lesbian and Gay Federation (*joint statement*) Action Canada for Population and Development, Plan International (*joint statement*) PROMOTION DES DROITS DE L'HOMME ET LE DIALOGUE GLOBAL

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Questions asked during the Interactive Dialogue:

- We have to redouble our efforts to eradicate entrenched discriminatory attitudes, gender stereotypes and practices in order to achieve gender equality and a sustainable future for all. What **key action areas** do the panellists see in this regard? (*European Union*)
- What are the most effective way of **mobilizing new actors** and how can States most effectively incorporate **gender perspectives** in our immediate and long-term response to the pandemic? (*Norway on behalf of a group of states*)
- How can we monitor that Covid-19 recovery plans are gender-responsive and follow a human rights based approach? (*Lichtenstein on behalf of a group of states*)
- How can we **best use the experience** acquired during this health crisis to strengthen women's rights, particularly in the area of preventing domestic violence and discrimination? (*Monaco*)
- In exceptional situations, would it be possible to set a **minimum threshold** to avoid a setback in the progress made? (*Angola*)
- Could the panellists share their views on the key role of **women as the key actors** in combatting Covid and the **main challenges** the world faces in combatting Covid? (*Cuba*)
- What steps can be taken to ensure that whilst responding to the COVID-19 pandemic, all women and girls continue to have access to **standard health care**, including SRH- services? (*Netherlands*)

Other Comments made during the Interactive Dialogue

Denmark (*joint statement on behalf of 56 states*):

- It is critical that women's and girls' health and rights are integrated in all COVID-19 responses. Women and girls in all their diversity must be **involved in all decision-making processes** to ensure responses are gender-responsive and do not further discriminate or exclude those most at risk.
- It is critical that organizations dedicated to ensure women and girls' **access to health services are fully equipped** and able to carry out their lifesaving work.
- Access to **essential sexual and reproductive health** services should continue throughout and after the crisis.

Concluding Remarks

Ms Editar Adhiambo Ochieng (*Video Message*)

- The world needs to **enforce existing policies** to ensure that women are protected during the pandemic.
- In Kibera, an informal settlement, the laws are not being enforced and women's **suffering is being ignored**. There are major problems such as teenage pregnancy, mental health issues, police violation.
- Called on the Council to spread the **message of women power**.

Dr. Natalia Kanem (*Video Statement*)

- Rights obligations continued to be relevant to women in all circumstances.
- Accountability must be **beyond legal protection**.
- Unless the world acted to meet the need and build resilience, even the more stable countries in the developing world would have to cope with **knock-on effects** of the pandemic.
- UNFPA asks all Member States to join the pledge for "**ceasefire in the home**" to counter gender-based violence.

Ms. Åsa Regnér (*Concluding Remarks*)

- Women and girls find themselves in a **contradiction** – they work in essential jobs literally saving the lives of the rest of the population, but at the same time these jobs are underpaid, undervalued and sometimes completely unpaid.
- Evidence shows that **policies that exclude women** from decision-making are simply less effective and sometimes harmful.
- In the COVID recovery phase, there are opportunities to **change the logic** that had been harmful to women and girls.