



RESISTIRÉ

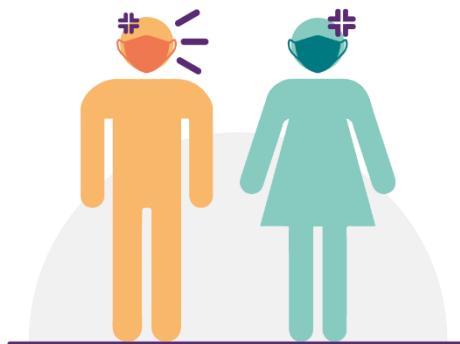
Reducing gendered inequalities
caused by COVID-19 policies

Improving national responses to gender-based violence: Lessons from the pandemic crisis

Recommendations to national-level policymakers to mitigate the gendered impacts of Covid-19, based on RESISTIRÉ findings.

20 December 2021

Emerging global and national data show increases in gender-based violence and increases in the reported number of cases of gender-based violence against women and LGBTQI persons during the COVID-19 pandemic. RESISTIRÉ analysis shows that a majority of countries failed to address issues of gender-based violence in their COVID-19 policy response and while civil society organisations managed to react in some instances, the pandemic also put pressure and circumscribed their range of activities.

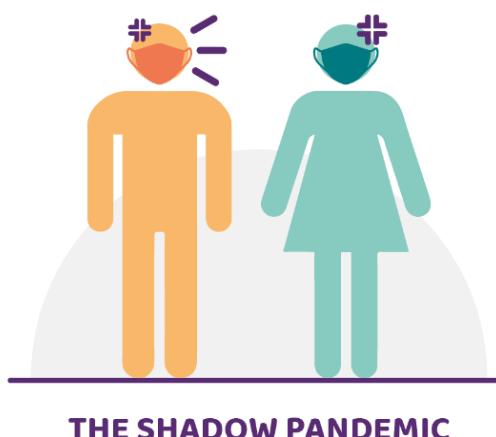


THE SHADOW PANDEMIC

➤ Background information

Gender-based violence against women is a widespread, global problem connected to health, crime, capital, economy, and inequality, and with pandemic proportions: **one in three women worldwide have been subjected to physical or sexual violence** by a current or former intimate partner. Similarly, **LGBTIQ+ youth and adults face widespread gender-based and phobic violence at home and outside**. This shadow pandemic has been exacerbated by the very measures (such as lockdowns, stay-at-home measures, and online schooling) put in place to mitigate the “other” pandemic, COVID-19.

Emerging global and national data, including the results from RESISTIRÉ¹, show increased incidence of gender-based violence including violence against LGBTQI persons specifically. The accompanying economic crisis and increasing unemployment (experienced in many countries) have also had an adverse effect on domestic violence and its prevention, where **economic hardship and unemployment have intensified, creating further inequalities and increasing the risk of violence**. With the additional challenges of pandemic lockdown and limited mobility, the economic crisis has also made women more reluctant to leave their partners or impose restriction orders against them. Hunger and survival of the family have become priority issues, displacing efforts to address domestic violence. These examples point to the **significance of adopting an intersectional approach to gender-based violence**, exploring the context-specific intersections of gender, sexuality, class, ethnicity, nationality, and citizenship-status.



¹ <https://zenodo.org/record/5541035#.YadDrNDMKUk>

➤ Analysis of quantitative data: main findings

Studies on help-seeking show **increases in calls to hotlines and contacts with shelters**. They also show that victims/survivors **seek psychological care from their GPs rather than from the criminal justice system and the police**, meaning they may receive less support and access to resources. While help-seeking through **contacts with shelters have increased** (Figure 1), there are opposite cases: Some feminist organisations have pointed to the **difficulty women have been facing in lockdown conditions contacting support services** without the knowledge of the violent partner (e.g., Turkey).

CHANGES IN LEVEL OF DEMAND FOR SERVICES DURING THE COVID-19 PANDEMIC

How would you describe the level of demand or your services during Covid-19 compared with before the pandemic?

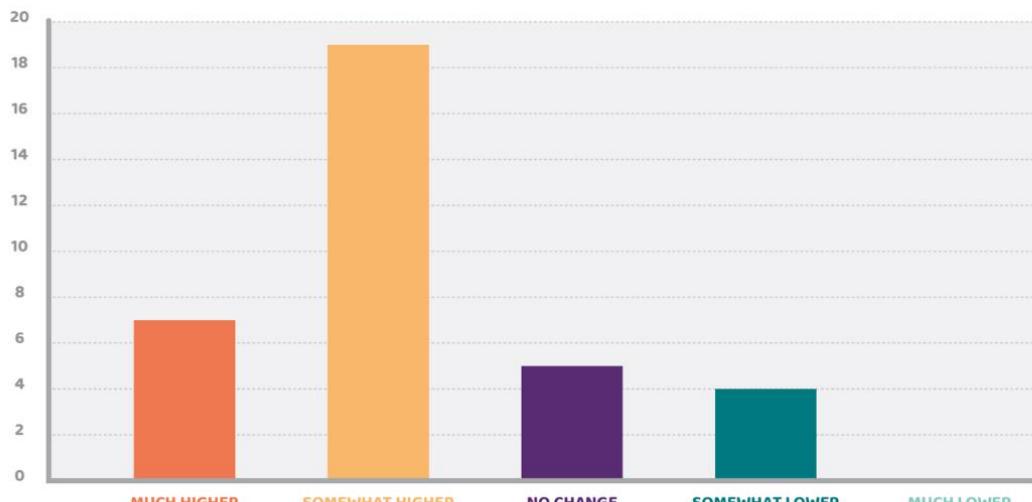


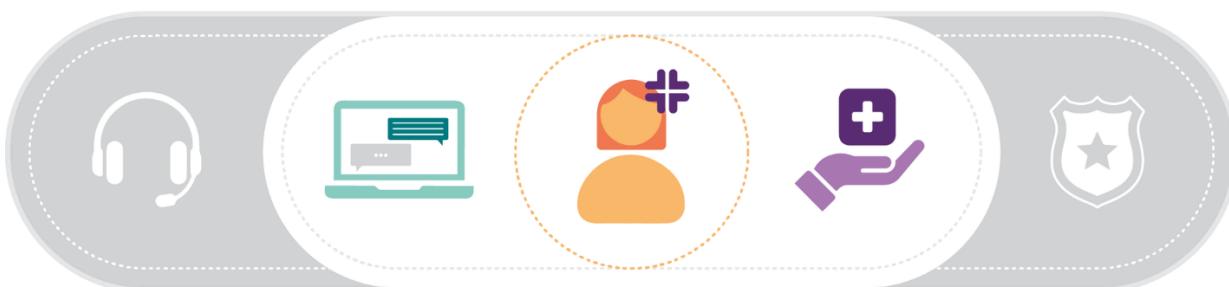
Figure 1: Changes in level of demand for services during the pandemic. Source: online survey conducted by EIGE2 with representatives of providers of services for victims of GBV in Europe (35 respondents from 17 members states).

Studies also show that domestic **violence against young women and LGBTIQ+ who returned to their family homes during the pandemic have increased**. This captures a form of **re-traditionalisation of gender roles and violence as control and surveillance**. Yet, pointing out the pandemic rather than male violence as the cause for increased GBV during this period is problematic in creating solutions. The importance and necessity of finding new ways for data collection (including the use of individual testimonies to understand the emerging challenges), developing new monitoring mechanisms, and designing new forms of support and solidarity services (based on existing models) have become evident.

Studies that explored the availability and provision of services for those experiencing gender-based violence demonstrated that due to the increased need for assistance, **pressure was placed upon shelters and charitable organisations that far exceeded their capability** – except for **in countries where extra funding and additional support were given** from either the state (Sweden) or private sources (France). These latter ‘anomalies’ or deviations provide better stories, and a basis for recommendation. COVID-19 restrictions have led to a lack of access to services; reduced availability of shelters for their protection; and difficulties in retaining and supporting staff. The reliance of most services – although not all – on external funding significantly undermined the resilience of these organisations to sudden crisis, such as the COVID-19 pandemic. These organisations are likely to continue to suffer post-pandemic, as they will be left without reserve funds.

In summary, **during the pandemic women and LGBTIQ+ experiencing domestic violence have relied more on 1) online services, rather than audio hotlines, 2) healthcare providers, NGOs, and local pharmacies, rather than the police.**

SUPPORT AND SOLIDARITY SERVICES



➤ Narratives: main findings

Narratives collected by the RESISTIRÉ project² showed several ways in which the pandemic had a strong influence on issues related to GBV. Below an example from Italy that underlines the increased request for shelters:

"I can also tell you about domestic violence. It increased enormously during the pandemic. Even where it didn't exist before, it has unfortunately occurred, in some situations. As the owner of a shelter for adoptive children, I received so many calls from social workers and other agencies, seeking my help. They asked me if I could take in women who had been victims of abuse. But I only take in minors, so it would have been too difficult for me to deal with more problems on my own. Anyway, it ended up costing me so much to say no."

In addition, experts and professionals consulted within the RESISTIRÉ activities underlined that:

- Lockdown and confinement measures increased inequalities related to gender-based violence and made the tools to combat GVB more difficult to access.
- The notion of home as a place of safety, which forms the basis for policy on isolation and/or confinement in the home, was problematized since it neglects and worsens the situation of victims/survivors of multiple forms of gender-based violence in the home.
- Women by far have been the most disproportionately affected group in the context of gender-based violence, in particular, women living with perpetrators; women in trafficking or prostitution; and undocumented migrant women.
- Even in countries where services related to gender-based violence were declared essential there were still obstacles for women to get the information and access these services.
- Women with low digital literacy were reported to be vulnerable since they could not make use of digital solutions for contacting services without being overheard or leaving traces. Such tools exclude those who do not access to devices and networks, and those who do not have the skills to use existing devices or networks.

² <https://zenodo.org/record/5595815#.YaZHN9DMKUk>

► Better Stories

Within RESISTIRE, we identify "Better Stories", a term taken from Dina Georgis for promising practices that identify how a given societal situation can be ameliorated to improve existing practices.

Better Stories of Policies

GBV and Technologies



The Women Emergency Support Application (KADES) is a mobile app launched in 2018 in Turkey for women who have been subjected to violence to report and call for support. It is a joint project prepared by the Ministry of Interior and the General Directorate of Security. Women who download this app register with ID numbers, and when they make a report of violence, this notification is forwarded to the nearest police station. If the person allows, location detection is also performed through this application. Instead of calling the police directly by phone during the pandemic, it was thought that easier support would be requested via the mobile app. KADES mobile app started to serve in a total of 6 languages, including Turkish, as of 07.03.2021.

GBV and Public spaces



In Spain, the regional governments adhered to Mascarilla-19 initiative. It was an additional tool for women that suffer gender-based violence to raise the alarm in a safe way. During lockdown, women could go to any pharmacy and ask for a "Mask-19". This word would alert the pharmacy staff, who would call the emergency number 112 and raise the alarm. During the lockdown, all shops in Spain were closed, except supermarkets and pharmacies. To go to these facilities was one of the few exceptions where people were allowed to leave their homes. This, in addition to the fact that the perpetrator was at home almost all the time, provided a space for women to report that they were suffering violence at home. This initiative spread to several other countries.

Better Stories of Civil society initiatives

In contexts where the policies to contrast the increase in GBV were weak or absent, civil society intervened with initiatives aimed at mitigating the increasing inequalities.



GBV and intersectionality

In Greece, an initiative organised by the NGO DIOTIMA with the support of the International Rescue Committee, was launched to respond to the needs of the populations that were stranded on the island of Lesvos because of the geographic restrictions imposed during the pandemic. These migrants, asylum seekers and refugees were forced to isolate in the crowded camp of Kara Tepe, which was created after the old one of Moria was burnt down. Isolation and overcrowding have made these populations more vulnerable to GBV and the initiative was aimed at providing support, information and protection to victims and potential victims. In the emergency conditions of COVID-19, the program offered psychosocial support, legal support and temporary shelter for survivors of GBV.



Information pack for Traveller and Roma women

In Ireland, the legal system is of little use to people who are highly disempowered, such as Traveller and Roma women. These are women who have often reading difficulties and/or very little education. They also belong to a community who don't trust or who fear the police (Gardai). Furthermore, Traveller and Roma women do not trust the state system, so they fear that if they call the police, their children could be taken into care by the state.

Pavee Point Traveller and Roma Centre, in collaboration with other Travellers' rights groups throughout Ireland developed an information pack that includes a barring and safety order leaflet, with or without audio, and a barring and safety order animation. It has been developed by Traveller women for Traveller women and the audio animation provides very clear information in the language that they use, so that it is easy for them to understand. The aim of this initiative was to close the inequalities gap between women Travellers and the settled community in access to rights. While directed mainly at Traveller and Roma women, it also takes an intersectional approach.



Technology and accessibility

The KADES app, developed in Turkey and described above, proved to be an interesting tool to support victims of GBV. At the same time, the lack of mobile devices was a barrier to accessing this tool. For this reason, the "Turkish Federation of Women's Associations (TKDF)" and "Sabancı Foundation", in collaboration with a technology retail company, launched the joint project "Technology for Women, Solidarity for all of us". The goal of the project was to collect second-hand smartphone, fix and deliver them to women in need.



GBV and the importance of data

To face the **lack of government statistics on the impact of Covid-19 policy responses on the LGBTQ+ community in Ireland**, three national NGOs (LGBT Ireland, the National LGBT Federation (NLF) and the Gay Community News (GCN)) conducted the "[LGBTI+ Life in Lockdown Survey](#)"³. This **survey included a sample of 1,855 members of the LGBTQ+ community**. The survey showed that 62%

experienced a decline in their mental health during the lockdown, substantially higher than the impacts reported in the general population in recent surveys. **This survey took an intersectional approach, aiming to recruit a sample that was as representative of the LGBTQ+ community as possible in terms of age, identity, geographic location, minority and socio-economic status**. One key finding is that LGBTQ+ people who are additionally marginalised including LGBTQ+ migrants, Traveller and Roma, refugees, older, living with a long-term disability, or other intersectional identities have been the most impacted amongst the LGBTQ+ community. The report on the survey issued three recommendations for future policy:

- 1) To recognise the additional challenges faced by members of the LGBTI+ community during this unprecedented crisis;
- 2) To ensure that LGBTI+ services are properly resourced and promoted, so that those who need them can be informed and have access. Funding models must be reassessed and restructured to help services deal with the crisis and the mental health issues that will arise as a result;
- 3) To allocate ringfenced funding for members of the LGBTI+ community who suffer intersectional discrimination, particularly in the health services sector.

³ <https://lgbt.ie/advocacy/publications/>



Training for operators

'Not Alone' is an integrated programme that was implemented by Save the Children in response to the COVID-19 pandemic. It aims to provide support (material, psychological, social, educational, etc.) to children and young people living in vulnerable families and in situations of hardship (including, therefore, for example, unaccompanied foreign minors). The programme provides (among other things) guidelines for operators in the field so that they can detect dangerous situations for women and children (e.g., domestic violence) as soon as possible and facilitate their escape.



➤ Recommendations

Develop multi-sectoral collaboration and intersectional coalitions

(*For national authorities and local authorities*)

Access to support services for specific groups of victims have been made more difficult during the pandemic, in particular for migrant women, homeless and women living in refugee camps. Policy responses on GBV adopted during the pandemic rarely addressed these inequalities.

- Apply an intersectional approach to all policies related to GBV.
- Promote the collaboration (by national and local authorities) with feminist, LGBTQ+, and other vulnerable groups' organisations in designing solutions that address both the pandemic-specific challenges, as well as long-term eradication of violence.

End the data gap to make informed decisions

(*For national and local authorities, with collaboration by CSOs*)

There is a lack of adequate and comparable data related to GBV during and after the lockdown. On the one hand, the collection of data usually focuses on the number of murders and the number of reports to police, and in the latter case, underreporting is an issue. Moreover, data from official sources and support services is not always coherent. More comprehensive data is required.

- Collect, monitor and analyse data on GBV during the COVID-19 crisis, to understand the impact of policy responses on GBV and design better, evidence-based, measures.
- Conduct surveys to reach potential victims beyond the official statistics on reports and femicides, and involve different stakeholders (e.g., CSOs) in the process.

Strengthen support services in times of emergency, Ensure resilience

(*For national authorities and local authorities*)

Results from RESISTIRÉ showed that one key challenge that emerged during the pandemic was the difficulty in reconciling continuity and quality of services. In particular, changing regulations, increasing demands for help and lack of resources (human and financial) hampered the access to support services. To ensure resilience of these services in the event of future crisis:

- Support services for victims of GBV should be declared essential, ensuring accessibility to all and safe conditions of access;
- Additional funding should be allocated to respond to crisis situations and make sure all services (shelter, counselling etc.) keep running.

GBV and ICTs

(*For national and local authorities, CSOs*)

One of the consequences of the pandemic has been the increased use of technology (telephone, video calls, chats, etc.) to provide long-distance support to victims of violence. However, as highlighted above by the Turkish experience with KADES, these technologies are not accessible to everyone, and care has to be taken to ensure that the conversations and data provided are safe and anonymous. Moreover, there has been an increase in violence perpetrated in digital spaces (cyberviolence).

- Continue promoting the use of ICT as an additional tool in GBV prevention and women support. The use of ICT provides a tool to reach women in rural areas, who are otherwise difficult to reach.
- Ensure accessibility, safety and anonymity when using digital technologies. In this sense, provide training to women on digital security, as well as to social workers and organisations supporting women. Likewise, guidelines can be provided for an adequate and ethical use of such tools.
- Support research on the specificities of digital forms of GBV.

GBV and public spaces

(*For local authorities*)

The pandemic and related policies such as lockdown and curfew have changed the ways in which GBV takes shape. For instance, it can take place in public spaces (transport, streets, etc.) that are emptier than usual. On the other hand, public spaces such as libraries or shops (e.g., pharmacies) have been useful information points or places to ask for help as showed above by the Mascarilla-19 initiative in Spain. Policies should explore the possibility to involve these spaces in their strategies to tackle GBV.

- Analyse urbanism with a gender perspective, with a view to carry out safety improvements in public spaces (e.g., remove black spots, improve lighting, safe transport system, etc.)
- Launch initiatives that involve public spaces and essential shops in delivering information and protocols to address requests for help and redirect victims to the designated services.

› About RESISTIRÉ

This factsheet is based on data collected within RESISTIRÉ's first research cycle which ran from 15 May to 30 June 2021. 31 national researchers worked with the consortium to map policies and societal responses, together with qualitative and quantitative indicators, related to the pandemic in the EU27 countries along with Iceland, the UK, Serbia, and Turkey.⁴ This research activity was completed with workshops and interviews with gender equality experts whose input informed the main findings from expert consultations.⁵

RESISTIRÉ is an EU-funded Horizon 2020 project the aim of which is to 1) understand the impact of COVID-19 policy responses on behavioural, social and economic inequalities in the EU27, Serbia, Turkey, Iceland, and the UK on the basis of a conceptual gender+ framework, and 2) design, devise and pilot policy solutions and social innovations to be deployed by policymakers, stakeholders and actors in different policy domains.

Find out more about the project at <https://resistire-project.eu>.



Discover all project outputs at <https://resistire-project.eu>.

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