



## Exacerbating inequalities: How COVID-19 is affecting women and girls in southwest Bangladesh

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The COVID-19 pandemic is negatively impacting individuals, families and communities, and exacerbating gender inequalities and social exclusion for the most vulnerable. World Vision's Nobo Jatra project, a USAID Development Food Security Activity (DFSA) in Bangladesh, is pivoting its efforts to improve gender equitable food security, nutrition and resilience for vulnerable populations during the COVID-19 pandemic. Our approach is based on a sound analysis of the gendered and social impacts of COVID-19, and then formulating measures to address those challenges. Interventions are focused on addressing four areas of intersecting vulnerabilities faced by women, adolescent girls and girl children during the COVID-10 crisis: economic loss and depravity, reduced access to healthcare services and facilities, increased pressure and burdens of unpaid care and domestic work, and a surge in gender-based violence.

### *Mitigating economic loss and depravity of COVID-19 on women and girls*

One of the major impacts of COVID-19 that has emerged is economic loss and depravity of the most vulnerable – women and girls. The COVID-19 impact assessment conducted by World Vision in June 2020, found that 84.9% of Nobo Jatra's direct participant households had reduced incomes in the previous month. The assessment also showed that 6.9% of households had no incomes in the previous month. The gender differentials revealed that the number of female headed households reporting

#### ABOUT OUR BLOG

Our site is a collaborative space with contributions from scholars, researchers, and practitioners from across the world. We aim to raise awareness about the gendered and food system related impacts of the COVID-19 pandemic. We hope this can be a space for rich discussion and sharing of experiences. Learn more about how we got started in the first post. We welcome submissions and comments.

#### ABOUT THE GEARE INITIATIVE

The Gender Equity through Agricultural Research and Education Initiative (GEARE) at Penn State brings together an interdisciplinary team of faculty and graduate students focused on the intersections of gender, agriculture, food security, and the environment. Through research, education, and evidence-based outreach, our team is dedicated to address global gender inequities. Our intent is for this blog to expand past GEARE and connect scholars across the world.

incomes. Women are especially vulnerable to loss of income because, in Bangladesh, 93.3 % of women hold more insecure jobs in the informal sector. [1] This sector is hard hit by the COVID-19 pandemic due to Government lockdowns and restrictions on movement. A majority of women are therefore less able to absorb the economic shocks arising from COVID-19 shutdown than men, and their economic and productive lives have been affected. Disrupted livelihoods are resulting in women's loss or decline in incomes and labor force participation. The reduction in income, or in some cases a total loss of income, is limiting women's ability to support themselves and their families, especially women in female-headed households. All of this has spillover effects on household food security, health and resilience – particularly for rural, female headed households. The decline in purchasing power for women is already resulting in negative coping strategies. The options that women are left with are not good choices—they include using up savings, borrowing loans at high interest loans from micro-finance institutions or local money lenders, or even selling productive and household assets. In some instances, girls are forced into marriage as families try to lessen economic burdens in their households. The nutrition of women and girls is also threatened as households reduce food consumption quantities and rely on cheaper less nutritious food for survival. These deepening economic challenges, if not mitigated, will have long term effects on gender equality and social inclusion. They will result in an increase in poverty heightened food insecurity, reduced resilience capacities for future shocks and stresses and perpetuate a chronic cycle of malnutrition, particularly for women, girls, adolescents and children.

To mitigate the economic impacts of COVID-19 on women and girls, Nobo Jatra is implementing a number of measures.

- **Sustaining nutrition and livelihood needs in the household.** Using the innovation of mobile banking, our program is providing cash grants to women and other vulnerable families to help them meet urgent needs relating to nutrition, livelihoods and other immediate household needs. The Nobo Jatra program is also actively seeking to increase production of saline tolerant, nutritious vegetables for household consumption and to sell surplus at local markets.
- **Accelerating income generating activities.** The Nobo Jatra program is also accelerating income generating opportunities that reduce the risk of transmission of the Corona virus, while at the same time taking advantage of the market driven opportunities of the crisis. Our programs are pivoting to support women producers to transition into making cloth face masks through cost share mechanisms, and scaling up health and nutrition business models through partnerships with private sector. Successful practices have included piloting such partnerships with the Social Marketing Company and Advanced Chemical Industries Limited to have Gold Star Members and Village Agents (basically local entrepreneurs) sell health and hygiene products at village and household level even during the COVID-19 crisis. The entrepreneurs are able to earn incomes whilst also ensuring that health and hygiene messaging and products continue to be accessible to families. Partnerships with the private sector are intended to continue in the long term.
- **Supporting adaptation of community-based savings and loans.** The programming efforts include supporting the revival and adaptation of community-based savings (Village Savings and Lending Associations) to provide extreme poor women with much needed access to finances. Women are also being provided with cash transfers for nutrition and when possible have invested a small proportion of funds into the savings groups. This means that women can avoid borrowing from micro-finance or micro-lending institutions that burden them with exorbitant interest rates that would perpetuate a vicious cycle of poverty long after the COVID-19 pandemic.



Salma a Nobo Jatra trained tailor has shifted to making masks on a cost share mechanism with Nobo Jatra

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Another major impact of COVID-19 is the reduced access to healthcare services and facilities for women, adolescent girls, children and other vulnerable groups. The government lockdowns to contain the pandemic have limited mobility and access to community level maternal and reproductive health care services. Health care systems in Bangladesh have limited public resources which are directed to COVID-19 resulting in disruptions to health services for women and adolescents. In Nobo Jatra working areas health services at the community level were scaled back in April and May during the Government lockdown. Flooding and heavy rainfall caused by cyclone Amphan in May also reduced access to health services such as pre and postnatal healthcare, access to sexual and reproductive health services, and care and support for survivors of gender-based violence. The impacts at the moment and in future include increased rates of adolescent pregnancies, malnutrition of pregnant and lactating women and children and maternal mortality. The reduced household purchasing power due to the economic downturn also impacts *if and how* families access healthcare. For example, the Nobo Jatra COVID-19 impact assessment showed that falling sick and being unable to afford treatment was cited by 36.2% of households as one of the main impacts of reduced incomes.

The impacts of reduced access of healthcare services and facilities during the COVID-19 pandemic will be felt in the longer term, especially if measures are not taken to mitigate them now. Nobo Jatra is working to increase women's and girls' access to health services and facilities in a number of ways:

- **Ensuring that women and girls have access to COVID-19 public health messages.** The program is facilitating the development and dissemination of targeted messaging on public health to women and girls. With limited access to education and therefore low levels of literacy, messaging must be accessible, culturally appropriate and understandable by all. Based on an assessment of the most popular choice for accessing information on COVID-19, the program is using public awareness messaging via megaphones and will also transition to using radio or local cable TV to share messages.
- **Ramping up household level social behavior change** to encourage families to access maternal and reproductive health care services. The programming is actively mobilizing communities through facilitators who help to dispel fears around exposure to COVID-19 at health service delivery points and explain health, safety and do no harm measures in place. Since June, regular services at health facilities have resumed and social behavior change messaging is critical to ensure that families access services.

## Addressing the increased pressure of unpaid care and domestic work

COVID-19 has also resulted in increased pressure of unpaid care and domestic work for women and girls. Social distancing measures, school closures and having families stay at home have put an increased demand on women and girls to cater to the basic survival needs of the family and care for children, the sick and the elderly. Adolescent and teenage girls are also having to take on increased unpaid care work, as they are home due to school closures. Nobo Jatra's impact assessment found 57.7% of households reported increased time spent on childcare and 51% of households are spending more time in unpaid work, particularly cooking. The pressure of unpaid care and domestic work is constraining women's ability to carry out paid work, if any.

These burdens of unpaid care and domestic work, if not mitigated, can have long-term effects on women and girls. Adolescent and teenage girls who are out of school for a long period are at risk of dropping out and not returning to school even after the crisis is over. Adolescent and teenage girls are also at risk of early marriage (and early pregnancy) as families look to alleviate economic burden. The increase in women's unpaid care work will drive inequalities such as wage disparity, and physical and mental health stressors. Nobo Jatra is working to address these challenges by:

- **Constructive male engagement.** Leveraging Nobo Jatra's Male Engagement for Gender Equality module, activities across the project consistently include messages on shared decision making, fair division of domestic and caregiving tasks, improving and supporting healthy relationships within families, and supporting gender equity, nonviolence and discouraging child marriage.
- **Public health messaging inclusive of messaging to mitigate risks of Gender Based Violence and child marriage.** Given the inherent risks of spikes in child



messaging includes information on child marriage legislation and reporting mechanisms. Nobo Jatra also works with faith leaders and child protection committees and provides life skills education to adolescents to [raise awareness on the risks of child marriage](#).

- **[Ensuring access to sufficient and affordable water services for women and girls](#)**. The program is focusing on business models for water service provision that limit the time spent by women and adolescent girls in collecting water. These include tapping into local entrepreneurs to deliver water to households. Our interventions support Water Management Committees to tap into local entrepreneurs who deliver water from Nobo Jatra supported water points directly to households. In doing so, families are able to access safe water without having to venture out or wait in lines, which would further expose them to COVID-19 infections.

## *Preventing the shadow pandemic: Gender-Based Violence*

In the context of a pandemic, there is a risk of surges in incidents of Sexual and Gender-Based Violence resulting from financial loss, health stresses, restrictions in movement, crowded homes and reduced peer support. Child marriage is a pervasive practice in Nobo Jatra working areas – and there is an inherent risk of spikes as families contend with economic impacts and look to alleviate perceived burdens. The Nobo Jatra COVID-19 impact assessment in June 2020, showed that 3.9% of households married their children off early due to reduced or no incomes. 28% of households also reported that risks of child marriage and other forms of Sexual and Gender-Based Violence had increased during COVID-19. The surge in Gender-Based Violence would have lasting impacts such as increased poverty rates, spikes in adolescent pregnancies, and a chronic cycle of malnutrition for women, adolescents and children. Nobo Jatra is working to address these challenges by:

- **[Expanding programs on social and behavior change](#)** to include awareness and messaging on prevention of gender-based violence through local radio and cable TV networks as these are the preferred medium for 59.2% of households surveyed in the impact assessment. The messaging is targeted at men, women, children, grandparents. The program is partnering with faith leaders to disseminate messages on prevention of COVID-19, as well as to discourage child marriage and other forms of Sexual and Gender-Based Violence.
- **[Capacity building on referral systems for Sexual and Gender-Based Violence](#)**. This referral system is weak in Nobo Jatra working areas, with no specific services at community clinics or Union Health and Family Welfare centers. Health staff are not trained to respond to sexual and gender-based violence. Accessing the Government One Stop Crisis Cells (at district and sub district level) is a key challenge for women, adolescent girls and victims of sexual and gender-based violence in rural areas. These barriers and challenges were further compounded due to Government measures to control the spread of COVID-19 and restrict movement. Health staff (both male and female) in community clinics, Union Health and Family Welfare Centers and sub district health complexes need training on how to respond to sexual and gender-based violence including on psycho-social support confidentiality, respect, safety, referral and the non-discrimination of victims.

## *Lessons learned*

Clearly, the USAID DFSA Nobo Jatra program is implementing a number of interventions, strategies and actions to address the gendered impacts of COVID-19 in southwest Bangladesh. There are a number of lessons we have learned through this process:

1. **[Integrating gender equality and social inclusion in COVID-19 analyses](#)**. It is essential to carry out a COVID-19 impact assessment that considers gender equality and social inclusion considerations. Such an analysis allows for deeper understanding of the intersectionality of COVID-19 and its gendered impacts. It also helps illuminate ways that such challenges can be addressed to mitigate impacts of COVID-19 not just in the short term, but to strategically lay foundations that can address midterm and long-term impacts.
2. **[Adaptive management and use of technology](#)**. With measures such as social distancing, we have learned to pivot to the use of technology, and to ramp up efforts we had used prior to COVID-19. For instance, mobile phone penetration in Nobo Jatra working areas is high. Nobo Jatra have used digital cash transfers linked to e-wallets on mobile phones to reach over 44,000 women since 2015.

program has effectively adapted the use of digital cash transfer during COVID-19. Over 7,000 pregnant and lactating women and Ultra Poor Graduation participants have continued to receive monthly digital cash transfers. In response to the COVID-19 context, conditions for regular cash transfer activities were relaxed as it was not possible to meet some of the criteria (participation in trainings, VSLA groups, courtyard sessions or Growth Monitoring Promotion sessions). This adaptation has ensured that poor and extreme poor women continue to receive cash support for nutrition and emergency household needs.

### 3. **Utilization of women's village savings and loan networks.**

Village Savings and Lending Associations (VSLAs) have proven to be resourceful, resilient and are supporting to revive local economies in Nobo Jatra working areas.

VSLA's, (100% women participants) have been taking the lead in shaping how the groups restart operating and Nobo Jatra

*A mother receives a cash transfer on her mobile phone e-wallet*

have been supporting them to navigate adaptations. Groups have changed meeting processes, scaled up health and hygiene awareness, created social funds for COVID-19 and revised lending methods to better meet the needs of members during the crisis. Since June 2020, 1077 VSLA's have restarted operating. 20,010 VSLA members have started saving cycles and deposited \$55,305. Given the reduced or total lack of incomes during COVID-19 and the losses from cyclone Amphan, 11.9% of members have taken loans to meet immediate household consumption needs, repair homes damaged by cyclone Amphan and revive livelihoods.

4. **Apply a gender equality and social inclusion (GESI) lens in responding to COVID-19.** Our World Vision GESI lens allows us to focus our interventions along a continuum of the GESI domains of access, decision-making, participation, systems and wellbeing. Our interventions increase equal access for women and girls at various levels. For economic empowerment, access includes access to finances through cash grants in the short term and through Village Saving and Lending Associations in the long term. Health access includes access to information, facilities and services, including Sexual and Gender-Based Violence grievance and referral systems. Women and girls are supported to make decisions that impact their lives, and on shifting social norms and behaviors. Interventions actively seek to promote the participation of women and girls in socially distanced safety nets and women's networks such as Village Saving and Lending Associations to access finance, health hygiene and Gender-Based Violence messaging. While it is challenging, it is essential to continue efforts to strengthen referral systems for Sexual and Gender-Based Violence through training of frontline Government health staff, village court representatives, Child Protection Committee members. It is also necessary to monitor Child Protection Committees so that they continue to act as 'watchdogs' to mitigate and report cases of child marriage and sexual and gender-based violence.
5. **Targeting interventions to women require continuous Social Behavior Change and counselling** to all members of the household – so that there are no unintended consequences for women. Especially if cash support is being directed to the hands of women.

Notes:

[1] [Bangladesh Bureau of Statistics Labor Force Survey 2016-2017](#)

*Photo caption (header): Halima A VSLA Group Leader who has also taken a loan to revive her grocery shop after lockdown*

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