



COVID-19 and Gender Justice:

FEMINISTS IN MENA DEFYING GLOBAL STRUCTURAL FAILURE



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COVID-19 and Gender Justice: Feminists in MENA Defying Global Structural Failure

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Introduction

The COVID-19 pandemic has highlighted and exacerbated existing economic, humanitarian and political failures across countries in the MENA (Middle East and North Africa) region and has deepened the multiple crises that continue to threaten peace, human security and justice.

As a result, when discussing the gendered impact of COVID-19 in the MENA region, it is necessary to also examine the root causes that have led to many of the pre-existing challenges being faced by these countries. These include the complex consequences of conflict, failed governing systems, exclusive and gender-blind development policies, war economies and politicisation of aid, hegemonic masculinities and patriarchy, increased discrimination on the basis of gender, race, nationality and ethnicity and increased securitisation and militarisation, among other considerations.

In an attempt to gain a contextualised understanding of the disproportionate impact of the COVID-19 pandemic on women and feminist movements in the MENA region that takes into account these pre-existing challenges and circumstances, the Women's International League for Peace and Freedom conducted a series of consultations with partner organisations in seven countries in the MENA region: Egypt, Iraq (both in Baghdad and Kurdistan Region of Iraq), Lebanon, Palestine, Libya, Syria and Yemen¹. These consultations took place between 12 May and 29 May 2020.

With a goal to understand the direct short- and long-term impacts of the COVID-19 pandemic on the lives of women in the region and on feminist movements and agendas, the consultations focused on exploring and unpacking the effects of the pandemic on women-led and feminist organisations. WILPF aims to mobilise its resources, networks and spaces in order to bring this analysis to regional and international stakeholders to adapt inclusive and responsive policies, as well as to feminist spaces worldwide to foster feminist support and solidarity.

These consultations were guided by WILPF's feminist analytical framework, and the organisation's **intersectional feminist analysis** of COVID-19 established a reference point for the discussions that took place.

¹ Please see page 20 for a full list of participating partner organisations.

Structural Failure in the Official Response to the COVID-19 Outbreak

Consultations with partner organisations across the MENA region identified extensive structural failures in governments' responses to the pandemic on women, feminist organisations and the feminist peace agenda.

Partners in Syria, Iraq, Yemen, Libya and Lebanon referred to the absence of an effective official response plan to address the consequences of the pandemic. Our partner in Lebanon stated:

“The COVID-19 crisis showed that no one was ready to respond or intervene or offer any kind of services. It also showed the lack of preparedness, weakness or limitations in the capabilities of state institutions. Women were absent from participating in national plans to respond meaningfully to the crisis, despite the number of women ministers in the government.”

Official responses were either weak, as indicated by partners in Yemen and Iraq, implemented randomly (Libya) and/or were inadequate, elitist or developed without consideration for a nation's unique needs, as indicated by partners in Syria, Palestine and Iraq. As partners from these countries stated:

“Response of the government to these crises is weak.” (Yemen)

“‘Stay at home’ measures don't work for overcrowded homes – and there was no aid provided by the government to low-income people as was promised.” (Iraq)

“[The] government didn't take preliminary measures: crowded places, families of IDPs were put by the government in schools.” (Libya)

“Policies put in place to respond to the pandemic by the government are copy-paste and not context-sensitive. There was no adaptation to the needs of Syrians. For example, they imposed a ban on public transportation in regime-held areas, where in fact many people can't afford taxis or don't have personal cars.” (Syria)

In Palestine, WCLAC and other protection service providers faced difficulties in transferring women to safe locations during the beginning of lockdown due to quarantine regulations. Regulations issued by the Ministry of Social Development (MoSD) stated that a woman could not enter a protection shelter without first having been quarantined for 14 days. However, at that time there were no guidelines or routines in place for quarantining women at risk of violence, making it nearly impossible for shelters to protect women while also ensuring their health and the shelter's compliance with ministry regulations.

As our partner in Palestine stated, *“This came at a time when there was also a palpable need for protection, with an increase in threats to women’s lives and severe physical violence.”*

In their attempt to unpack the underlying root causes of their governments’ failures to respond to the pandemic, partner organisations unanimously agreed that the COVID-19 pandemic exposed fault lines on economic, humanitarian, political and security fronts and its impacts found roots in the structural flaws and dire inequalities that had already existed.

Exploring the Root Causes of COVID-19 Response Failure

The primary fault lines in the official governmental responses across the MENA region countries and their underlying structural flaws are the direct consequence of authoritarianism, patriarchy, capitalism, colonialism and political opportunism. Each of these topics is explored further as follows.

Authoritarianism: Militarisation and Securitisation of the Virus

Partner organisations from Yemen, Egypt, Iraq and Syria agreed that the official response to COVID-19 was highly securitised. In Yemen, authorities targeted doctors and activists who revealed information or updates about the pandemic to the public. The same was done in Iraq² and Egypt,³ where journalists, activists and women human rights defenders were detained for sharing information or speaking out about the government’s response. In Egypt, the government unjustifiably arrested doctors who shared information about the collapsing health system, as well as young teenagers for posting about COVID-19 on social media (especially on TikTok)⁴, while using accusations of immorality or terrorism to mobilise public opinion against them.

As partner organisations in these countries shared:



“One can’t help but realise how tyrannical the government’s response in Syria was.” (Syria)

“[There was] targeting of those who revealed COVID-19 information; a woman doctor was intimidated. There is severe censorship on speaking about anything related to COVID-19.” (Yemen)

2 Human Rights Watch, “We Might Call You in at Any Time: Free Speech Under Threat in Iraq,” June 15, 2020, <https://www.hrw.org/report/2020/06/15/we-might-call-you-any-time/free-speech-under-threat-iraq#>.

3 Amnesty International UK, “Egypt: medics arrested for speaking out over COVID-19 failings,” June 18, 2020, <https://www.amnesty.org.uk/press-releases/egypt-medics-arrested-speaking-out-over-covid-19-failings>.

4 The Guardian, “Egypt arrests young women who posted clips on TikTok,” June 11, 2020, <https://www.theguardian.com/world/2020/jun/11/egypt-arrests-young-women-who-posted-clips-on-tiktok>.

“Activists are being held when writing something on social media and are being accused of belonging to a terrorist group. Last week they arrested three girls for posting on TikTok who didn't commit any crimes, but were accused of ‘spreading immorality’. Also, one of the doctors said that they were having challenges in hospitals, and was transferred to the legal department inside the ministry. Another doctor from Alexandria was accused of spreading false information.” (Egypt)

Along these same lines, some governments have resorted to militarised practices to enforce social distancing and “stay at home” policies, such as in Syria, Egypt, and Iraq where curfews and fines were imposed. Ironically, the curfews were strictly imposed in the evenings⁵ while life remained largely normal during daytime, with no regulations in place to encourage social distancing or any other preventative measures. In Iraq, militias and armed groups were used to force people to stay at home. As our partner in Iraq stated, “[There was] use of police to stop people from being on streets – 33,000 people received fines of up to \$90 or imprisonment. There was also deployment of fighting factions/militias in main streets of Sadr City where large numbers of people gathered, and where Shia cleric and politician Moqtada al-Sadr ordered his Peace Brigades to impose a curfew in the city.”

Moreover, partner organisations in Palestine (West Bank) and Egypt indicated that their governments used the virus as a way to normalise the spread and intervention of the military in their respective COVID-19 responses:



“They wanted to affect the collective consciousness of the Palestinian people; militarisation/policing is something normal, termed as ‘checkpoints of love’ (hawajez el mahaba).” (Palestine)

“There is tolerance and reconciliation with the State’s violence; a normalisation of [the] State’s violence.” (Egypt)

Partner organisations in Yemen and Syria pointed out that both internationally recognised and *de facto* authorities sought to utilise challenges related to COVID-19 for political or geopolitical gains, economic interests or to further exercise authoritarianism and oppressive policies. For example, according to partners in Yemen, access to the internet was leveraged as a “weapon of war” by warring political parties and was prohibited, leading to access being available only on the black market at extortionate prices. Meanwhile, in Syria, access to safe drinking water was cut in the region of Raas el Ein, a city outside of regime control, to further stifle and restrict internally displaced persons (IDPs). As our partner in Syria stated, “Water is being used as a weapon. When they cut water from Raas al Ein, people had to buy water from wells. The issue of access to water, and how it will be retrieved, also needs to be considered as it is a highly gendered issue.”

Syrian partner organisations also stated that the regime used the pandemic as an excuse to increase security control, surveillance and restriction measures that had been implemented in regime-held areas prior to the outbreak of COVID-19, such as the severing of transportation between regions within the country. The outbreak was also used by the regime to increase its security grip

⁵ As our partner organisation in Egypt stated, “There is an imposed curfew from 8 p.m.”

and forcible detentions and arrests. For example, the regime’s reporting tool for cases of infection (a tool called “Inform”) has led to patients being purposefully placed in securitised quarantine centres.

Our partners in Syria shared further insights into the impact of the regime’s leveraging of COVID-19 to increase securitisation in the country. They stated:



“The invasion of privacy increased with the excuse of the coronavirus. This is worrying for activists, and has left women human rights defenders completely restricted. Securitisation of the virus is weaker in areas outside regime control (in comparison to regime-held areas).”

“In regime-held areas, which were previously under siege, the lockdown came as a new excuse to further impose restrictions and limit the movements in and between those areas.”

“Many people got stuck in Lebanon when the border closed, as the return back to Syria was conditional on staying in quarantine centres, which were securitised.”

WILPF’s Egypt-based partner indicated that the militarisation adopted by the Egyptian regime in response to COVID-19 was considered one of the main challenges preceding the outbreak: *“Egypt is a police state that operates with a ‘we will teach you a lesson’ mentality through threats and instilling fear amongst the population; the police state operates as a separate entity within the larger state of Egypt.”*

Partner organisations indicated that these practices have roots in the historically entrenched context of authoritarian regimes in the MENA region. Partners stressed that the regimes’ highly securitised, militarised and intelligence-based practices and responses could be seen as “natural” extensions of their pre-existing authoritarianism.

Patriarchy: Oppression of Women through Violence and Isolation

In their analysis of the most prominent structural flaws in their countries, partner organisations – namely in Palestine, Lebanon, Egypt, and Iraq – pointed to the patriarchal policies and discourses implemented in response to the increase in domestic and gender-based violence during lockdown.

In Egypt, our partner indicated that women’s issues were “neutralised” and were not dealt with in an official or serious manner within the state’s response agenda: *“Women’s issues are not put seriously on the government’s agenda (the case of the unjustified delay in discussing the law amendment proposal of the Personal Status Law (PSL) in the parliament; the parliamentary agenda does not reflect the needs of people).”*

The halt of judicial processes during the pandemic significantly highlighted the weakness of the official responses in Egypt, Lebanon, Palestine and Iraq. This had direct negative implications on partner organisations’ work, as they had to dedicate more resources and efforts to respond to women’s needs in the absence of support from the judicial system or official avenues for reporting and seeking justice.

As our partners in these countries stated:



“During the pandemic, we noticed that there [was] a lack of understanding in gender-based violence (GBV) and the response to it by the judges; the judicial authority is still patriarchal in its nature, and doesn’t have the required sensitivity to deal with such cases. In a report issued by the Iraqi Ministry of Interior, 3,637 cases of spousal violence were reported. We sensed negligence in holding domestic abusers accountable, where half of these cases were resolved by reconciliation, and only 43 were served, and 345 were released.” (Iraq and Kurdistan Region)

“The judicial systems are put on hold, despite women's priorities and increased needs (GBV, alimony, divorce, etc.).” (Egypt)

“COVID-19 has affected the functioning of safe shelters for women victims/ survivors of domestic violence.” (Palestine)

“The negative impact of the virus on the situation of women in Iraq was evident in the unprecedented increase in cases of domestic and gender-based violence. Murders, rapes, suicides and sexual assaults have occurred, and some cases where the victims were women and young girls became matters of public concern due to how atrocious they were.” (Iraq)

Capitalism: Collapsed Healthcare Systems, Economic Disparity and Feminisation of Poverty

Partner organisations have highlighted that vulnerable groups, including elderly persons, people with disabilities, low-income households, women heads of households, women survivors of domestic violence and women working in the informal economy without social protection, were disproportionately affected by the pandemic and by inadequate governmental responses to it.

Governments, according to partner organisations, have failed to properly respond to the mounting pressure on healthcare and social support systems by favouring continuity of business and economic activities over the livelihood and safety of the most vulnerable groups. In Egypt, Iraq (Baghdad and other cities, as well as Kurdistan Region), Palestine and Lebanon, partner organisations pointed to the increase in rates of poverty and unemployment, the dire living conditions of women and families, inflation and currency fluctuations, among other key markers of the increasingly dire impacts of the government’s lack of response to the needs of vulnerable populations. Some of their observations included:



“The Kurdistan Regional Government has not been paying wages for the past five months. A lot of families rely on a daily wage. 80,000 young people have become unemployed as a result of COVID-19.” (Kurdistan Region)

“People, especially women on the lowest income, who live with less than 30-50 euros per month, have become hungry as a result of the lockdown. People cannot stay at home due to risk of starvation and need to work to earn their living.” (Egypt)

“Many of the women supported through WCLAC’s helpline have also reported economic hardship, unemployment and food insecurity, and this seems to have increased during lockdown.” (Palestine)

Hence, the government's responses furthered the feminisation of poverty, with grave and disproportionate burdens and impacts on women. Enforced lockdown measures by governments cannot be endured by many groups, namely women heads of households and those engaged in subsistence or informal work to support their families. Additionally, **the absence of economic security and basic welfare measures has threatened women** as they were the first to be subjected to arbitrary dismissal with the onset of the pandemic, particularly in the service sectors where women represent the majority of workers in MENA countries.

According to the UN, 76 per cent of women in Palestine reported that their families had lost their income, compared to 65 per cent of men. Similarly, a UN Women flash survey found that 95 percent of women business owners of micro, small and medium-sized businesses said their work had been impacted by the pandemic, while 25 per cent of women in the private sector are working without an employment contract or pay protection.

According to a newly released **report** by Palestine’s Women’s Center for Legal Aid and Counselling (WCLAC), 74 percent of men and 65 percent of women feared loss of income, while 59 percent of men and 57 percent of women feared the inability to secure food for their families.⁶

Partner organisations in the Kurdistan Region, Libya and Palestine provided further insights into the impact of COVID-19 shutdowns on women:



“The service sectors where women mainly work have been hit severely. In the private sector, big multinational companies paid employees one and a half months’ salaries and then stopped paying. When laying off in the private sector, women were the first to be laid off. The same applied in governmental institutions.” (Kurdistan Region)

“Consequences on women will be bad, especially for women heads of households (10 to 20% of households are women headed).” (Palestine)

“All small initiatives that used to be run by women as part of the informal service sector (catering, organizing weddings and parties, etc...) have all been stopped due to the social-distancing measures and lockdown. Some women lost their jobs. Unfortunately, there is no data on the unemployment rates in Libya, however, we are certain that women are very much affected.” (Libya)

⁶ UN Women, “COVID-19 risks creating and exacerbating women’s vulnerabilities and gender inequalities in Palestine, warns UN Women,” May 7, 2020, <https://reliefweb.int/report/occupied-palestinian-territory/covid-19-risks-creating-and-exacerbating-women-s>.

Partner organisations have also highlighted that the inadequate or weak official responses find roots in the lack of proper investment in healthcare systems pre-COVID-19, as well as infrastructures that had serious structural problems and challenges. This is mainly due to the capitalist political economy and states' corruption. In the case of Libya, our partner organisation stated: “[The] healthcare system has collapsed and has been severely affected by corruption and the ongoing war”.

Hence, in Libya and other MENA countries, the COVID-19 outbreak shed a bright light on the pre-existing economic disparities, feminisation of poverty and collapsed healthcare systems, as well as the underlying structural causes and the dire consequences on human security – all of which have been exacerbated by the pandemic. Our partner in Libya elaborated on the impact of these challenges:



“Libyans used to travel to Tunisia, Jordan or Egypt to access healthcare, now people are not secure because they can’t travel anymore if the healthcare system failed to provide the necessary service in Libya. The health system doesn’t have the capacity to work on emergency cases (capacity is for about 100 cases); and even healthcare professionals don’t have masks, gowns, gloves or anything.” (Libya)

Colonialism: COVID-19 Under the Israeli Occupation

WCLAC, our Palestine-based partner organisation, indicated that Israel as an occupation is using COVID-19 as a pretext to move forward with the annexation plan of the West Bank in the occupied territory.

WCLAC highlighted the numerous international humanitarian law (IHL) and international human rights law (IHRL) violations that have continued to be carried out by Israeli forces despite the lockdown and pandemic, and specifically how these have affected Palestinian women. They stated:



“During the pandemic, the fear of contracting COVID-19 has added yet another dimension to the stress for Palestinian families due to the threats associated with Israeli soldiers entering private homes during night raids, or keeping underage children in detention overnight. Women that WCLAC [works with] have reported spending days trying to disinfect their houses after night raids, and weeks being concerned about the health of a child or spouse after they have been held in detention.” (Palestine)

WCLAC has highlighted seven types of violations that have been carried out during the COVID-19 pandemic, all of which have had a detrimental impact on the well-being and security of Palestinian women. These include night raids and arrests, detention of children, settler violence, chemical spraying and environmental negligence, neglect or blocking of access to healthcare and house demolitions. Violations such as these severely harm Palestinian women’s physical and psychological well-being and are directly contrary to Israel’s obligation to respect women’s human rights, and their specific responsibilities as an occupying power under IHL.

Political Opportunism and Virus Politics: Weaponising Water, Electricity, Health and Basic Needs

Partner organisations in countries with ongoing conflicts or wars (Libya, Syria and Yemen) indicated that the official response was not in line with the magnitude of the complex pre-existing challenges.

Examples included, but are not limited to:

1. The complete absence of infrastructures and human security.⁷ As partner organisations stated:



“The causes of death are too many, no water, the water is mixed with sewage water. The infrastructure is severely hit, especially in terms of water and electricity. IDPs need rent subsidies instead of residing in informal settlements, and the country needs to provide reparations.” (Yemen)

“The situation in camps is dire; there is no regular access to water, no toilets, as well as extreme overcrowding.” (Syria)

“The main challenge is access to WASH (water, sanitation and hygiene) services.” (Syria)

2. Overpopulation and overcrowding, particularly among refugees and IDPs in Syria (Idlib), Iraq and Yemen. For example, continued military action by the Syrian regime during the COVID-19 crisis and the resulting forced demographic change⁸ left nearly three million civilians besieged in a small pocket in Idlib.⁹ They now live in an area that, prior to 2011, was home to no more than 500,000 people.¹⁰ Partners in Syria and in Kurdistan Region further elaborate on the impacts of overcrowding:



“Social distancing in western Aleppo, northern Idlib and Azzaz is not realistic as people cannot socially distance. There are three million people living in a very small geographic location.” (Syria)

“Regarding the IDPs in Duhok, how can we discuss ‘staying at home’ and ‘staying safe’ when there is no safety in the camps and the only thing separating families is a cloth barrier?” (Kurdistan Region)

7 According to the United Nations, human security is “an approach to assist ... in identifying and addressing widespread and cross-cutting challenges to the survival, livelihood and dignity of their people.” This approach calls for “people-centred, comprehensive, context-specific and prevention-oriented responses that strengthen the protection and empowerment of all people.” United Nations Trust Fund for Human Security, “What is human security,” <https://www.un.org/humansecurity/what-is-human-security>.

8 “Forced demographic change” is when demographic change takes the form of forced displacement of populations from certain areas, changing the names of areas and the transfer of population groups.

9 Refugees International, “A crisis on top of a crisis: COVID-19 looms over war-ravaged Idlib,” April 28, 2020, https://www.refugeesinternational.org/reports/2020/4/27/a-crisis-on-top-of-a-crisis-covid-19-looms-over-war-ravaged-idlib#_edn5.

10 Ibid.

3. **Humanitarian and natural disasters that predated the outbreak of COVID-19**, particularly in Yemen and Syria, in addition to the spread of epidemics and diseases. As a result of the pandemic and the ongoing impacts of crises that preceded it, there is an increasing lack of adequate access to clean water, sanitation and hygiene in many MENA countries. This has led to catastrophic consequences, such as the outbreak of cholera and other diseases in Yemen.
4. **Systematic targeting of healthcare facilities in Syria and Yemen.** Over the past years, the opposing parties and armed groups fighting in both Syria and Yemen used siege and starvation of civilians as a weapon in their hostilities. In Syria, for example, the Syrian regime prevented, obstructed or confiscated relief and health supplies, while the sick and wounded are denied medical care. Siege on Idlib in Syria and on Taiz in Yemen impacted women severely and disproportionately. The lack of food and medical care has negatively affected the health of pregnant and breastfeeding women, and has led to higher infant mortality rates.¹¹

According to the partner organisation in Yemen, Saudi Arabia's pursuit of a unilateral ceasefire is one of the most demonstrative examples of how states are exploiting the virus for geopolitical and economic purposes. Rather than pursuing ceasefire solely for the purpose of establishing peace and enabling aid during the pandemic, Saudi Arabia's actions reflect the "kingdom's dire economic and social crisis caused by the pandemic and the fall in oil prices."¹² The fighting has not been completely halted but is at a temporary ceasefire.

In Yemen, the situation is similar for the Houthis regarding the political gains they are hoping to achieve in Marib, as well as the Southern Transitional Council's declaration of self-administration in the South of Yemen, showcasing how it seized a geopolitical opportunity on the premise that the internationally-recognised government has failed to provide adequate services.

The United Nations' Response to COVID-19: Inadequate and at Times Biased

Some partner organisations indicated that the United Nations' response to the pandemic, in some contexts, was inadequate and at times biased. For example, Syrian partners highlighted that any humanitarian or aid responses to combat COVID-19 in areas outside regime control had to pass through the regime. The same applied to any provision of supplies from the World Health Organization (WHO). As the partners in Syria stated, *"There is differential treatment by the UN in different regions of Syria, and this was seen again with the COVID-19 response. UN and WHO deal with the Syrian regime."*

Our partners in Syria have also shared accounts on the ineffective responsiveness from the United Nations despite several attempts at communication. They stated:

11 UN News, "Yemen: maternal and newborn health 'on the brink of total collapse', UNICEF alerts," June 14, 2019, <https://news.un.org/en/story/2019/06/1040531>.

12 Bruce Ridel, "Saudi Arabia wants out of Yemen," Brookings, April 13, 2020, <https://www.brookings.edu/blog/order-from-chaos/2020/04/13/saudi-arabia-wants-out-of-yemen/>.



*“In early March, we published a petition along with **Families for Freedom**, addressing the UN Special Envoy for Syria and Deputy Special Envoy, the World Health Organization (WHO), as well as the International Committee of the Red Cross (ICRC), the UN Office for Humanitarian Coordination (OCHA) and members of the UN Security Council. The petition called on these bodies to use their power and influence to immediately pressure the Syrian regime to release all detainees held in prisons and unofficial detention centres amid the rapid global spread of the coronavirus¹³. We have also asked that the international organisations such as the ICRC and the WHO have regular access to detention facilities in order to improve health conditions and provide critical sanitary measures and medical treatment to detainees. However, our demands went unanswered and unacknowledged despite several attempts to communicate¹⁴.” (Syria)*

Peace Track Initiative, our partner organisation in Yemen, indicated that the United Nations Secretary-General did not follow up on the call for a global ceasefire sufficiently: *“The UN is not stepping up, and they don’t have control mechanisms. COVID-19 further demonstrated [the] UN’s shortcomings to push for peace talks.”*

Impact of COVID-19 on Women and Feminist Agendas and Organisations in MENA

As the outbreak of COVID-19 exacerbated pre-existing structural flaws and brought them to light, partner organisations agreed that acute gender injustices both before and during the pandemic were further compounded by the impacts of patriarchy, militarism and capitalism. These ideologies have directly contributed to the sidelining of gender-related issues, which must be addressed if any progress is to be made in advancing peace, freedom and justice in MENA countries and around the world. Our partner organisations in Syria and Lebanon spoke about the relationship between oppressive ideologies and the sidelining of feminist agendas:



“There is definitely a connection in the tools used; the injustices [are] due to 40 years of dictatorship, nine years of conflict, and now COVID-19. The linkages are becoming very visible as to how they carry over and impact women in the current phase.” (Syria)

“The pandemic has magnified all human rights issues and violations, including basic human rights to education, health, food and clothing. Moreover, it has compounded gender injustices through the sponsorship system for women migrant workers, or women’s right to nationality. These issues floated to the surface due to the lack of structures or response mechanisms.” (Lebanon)

13 The Syria Campaign: Families for Freedom, “COVID-19: Urgent action to protect Syrian detainees,” <https://act.thesyriacampaign.org/sign/covid19-protect-syrian-detainees/>.

14 Twitter, Families for Freedom, May 22, 2020, <https://twitter.com/FamiliesSyria/status/1263845914239660032?s=20>.

Key Feminist and Gender Issues to be Addressed Post-COVID-19

a. The care economy and economic security for women

Some partner organisations indicated that lockdown policies were gender-blind and failed to address existing gender biases and discrimination. Traditional or stereotypical gender roles resurfaced and became more prominent with the confinement of family members in households.

Additionally, societal and political expectations that posit women in an exclusively caregiving role have also resurfaced. Faced with at-home distance-learning or working, managing the household and caring for family members (especially children and the elderly), women have found themselves double-burdened and stuck in between two conflicting roles – falling into the trap of traditional gender roles within the household. As our partner organisation in Libya stated, *“Additional online education and homeschooling returned women into care roles. The society believes that this role is women’s role. Patriarchy states that women’s work is not important and their primary role is care work.”*

Under informal economies, women were at the greatest risk in the absence of job opportunities, in addition to the pre-existing absence of safeguarding measures and guarantees to protect vulnerable populations. Our partner in Lebanon supported this assertion with the statement, *“Women are more at risk of discrimination in the informal economy.”*

b. Increased sexual and gender-based violence and neglect of sexual and reproductive health and rights

Partner organisations unanimously agreed that the increase in domestic violence can be linked to the failure of governments to implement integrated and effective policies in response to COVID-19.

In Kurdistan and Iraq, cases of femicide increased:



“Domestic violence has increased, so have the rates of femicides.” (Iraq)

“Domestic violence is increasing [and] confinement can be hell for a family that already has problems.” (Kurdistan)

Meanwhile, in Lebanon and Egypt, there has been an increase in cases of domestic violence as a result of the absence of judicial systems addressing cases related to women:



“The Ministry of Interior Security declared an increase of 180% in reported cases of domestic violence, and sexual cyber blackmailing. There are institutional dysfunctions related to the response plan, which is not gender-sensitive.” (Lebanon)

WILPF's partner organisation in Egypt, pointed to a significant increase in physical and psychological violence, as well as marital rape and incest, resulting from the complete denial of security or judicial systems in addressing any of those cases, and the regime failing to prioritise responses to those issues in an effective way:



“There has been an increase in domestic violence and psychological violence: 42% of beneficiaries are now being hit at home, 90% of the beneficiaries are victims of psychological violence. Additionally, there has been an increase in incestuous rape, and there is widespread denial at police stations. The prosecutor is also in denial.” (Egypt)

Partner organisations in Syria pointed to the challenges around accessing sexual and/or reproductive health services, including for pregnant women: *“Pregnant women in Al Rukban, for example, do not know how to access hospitals since the closing of the border with Jordan.”*

c. Censorship, silencing and active targeting of women human rights defenders

Partner organisations in Iraq, Yemen, Egypt and Palestine indicated that arresting, harassing and silencing women rights activists is on the rise due to their activism (sharing information, updates, responding to the COVID-19 pandemic) and is shifting in some countries (like Iraq) to digital harassment (blackmailing, etc.).

Our partners in Iraq and Egypt shed further light on these circumstances:



“The increased use of the internet has highlighted the extent of online blackmail and digital harassment.” (Iraq)

“Feminists, doctors, journalists are also attacked, prisoned or harassed (pretexts of spreading false information about COVID-19).” (Egypt)

d. Heightened risks for marginalised and disadvantaged groups: LGBTQI+ and women migrant domestic workers

One of the most notably dysfunctional systems in the MENA region that has been highlighted by the COVID-19 crisis is the *kafala system*¹⁵ in Lebanon. This system has exacerbated the pre-existing suffering, discrimination and racism that foreign domestic workers were already subjected to prior to the pandemic, particularly in light of the lack of available protection mechanisms available to them.

¹⁵ Under the *kafala system*, all migrant domestic workers in Lebanon are excluded from the Lebanese Labour Law and are governed instead by a sponsorship system, which ties the legal residency of the worker to the contractual relationship with the employer. For more information about the *kafala system*: <https://bit.ly/3hDyKHR>.

Our partner organisations in Lebanon and Egypt provided additional insights into these challenges:



“Migrant women domestic workers are at risk of losing their jobs, and this issue has become a priority. They cannot be paid, cannot be sent back to their countries, they can’t receive healthcare, and don’t have money to eat.” (Lebanon)

“There is no law to protect domestic workers. They are usually live-ins and have very little vacation. We don’t know how they are treated within the homes. They cannot report, and are unprotected.” (Egypt)

In Egypt, the partner organisation also expressed that LGBTQI+ persons have faced overlapping challenges under lockdown, especially in cases where they are confined with hostile family members. As our partner stated: *“LGBTQI people have a lot of challenges that could lead to violent situations.”*

Compounded Challenges Facing Feminist Spaces and Agendas

The following challenges that have emerged as a result of COVID-19 have been identified as directly or indirectly impacting progress of feminist agendas in MENA countries.

a. Shifts in donors’ priorities while maintaining restrictive requirements

Partner organisations have unanimously agreed that the current shift in donor priorities due to the COVID-19 outbreak has posed serious short-term (and potentially long-term) risks to their operations and sustainability. Partner organisations have also highlighted the risk associated with possible shifts in feminist agendas and priorities, due to the need to sustain the organisations’ work whilst adapting to shifting donor priorities.

Other risks that were highlighted include the economic insecurity of organisations and team members, the shift in operations and methods of work and the prioritisation of fundraising over emergency response. As our partners in Libya and Syria stated:



“As the international community is shifting funding to focus on COVID-19, this can have a detrimental impact on the sustainability of our work on the Women, Peace and Security agenda.” (Libya)

“We’re planning on submitting applications to donors but are no longer finding the time to submit proposals. Additionally, donors are not as excited about funding programmes at this time.” (Syria)

“We are sustainable for the next year, but there is a lack of clarity on the five-year plan as this is based on donor agendas and priorities.” (Syria)

“[The] Women Now centre that used to receive 150-200 women a day now only receives 15, as we are adhering to strict social distancing measures. In order to abide by social distancing measures, we had to decrease our services, and we have not been able to reach those most in need.” (Syria)

b. Currency devaluation and increased restrictions on money transfers

Partners in Lebanon and Syria referred to the worsened economic situation due to COVID-19 (currency devaluation and fluctuation, inability to access banks due to restricted hours and social distancing measures, etc.) and the associated risks to the ongoing maintenance of their operations, especially in light of donor requirements or preferences that limit flexibility in how funds are used.

Our partner in Lebanon stated:

 *“We have been affected by the Lebanese Lira devaluation (against USD). Since the end of last year and the start of the uprising, the devaluation of currency has meant that instead of doing five training [sessions] we are only able to do one. Some donors accepted reallocations and amendments, while others did not; some donors did not even accept shifts in activities.” (Lebanon)*

Moreover, partners in Syria and Yemen have highlighted the risks associated with the pre-COVID-19 embargoes, sanctions and restrictive measures on money transfers, and the additional layers of repercussions these have had on transferring money to their teams and operations in respective countries:

 *“The banks in Yemen stopped receiving transfers and informed our team in Aden that the intermediary banks based in China are not operating. The transfers as such bounced back and fees were deducted. We transferred through cash transfer companies but the commissions were very high to Yemen.” (Yemen)*

c. Digital security and accessibility issues

Most of the organisations agreed that “online and distance-working/learning” are not inclusive, especially when it comes to community mobilisation or provision of services. The shift in operations due to COVID-19 must take into consideration some pre-existing factors, especially in conflict-affected countries that lack proper infrastructure for electricity and internet connectivity.

Additionally, partner organisations have raised the issue of digital security, especially in light of increased attacks on women activists, or the need for proper, adaptive and inclusive response to women survivors of domestic and gender-based violence where issues of accessibility, confidentiality and privacy are highly compromised.

Partners across the MENA region commented on these concerns:



“There are issues with reach, access to the internet, as well as electricity and internet cuts. Furthermore, we are struggling with online programmes and applications (apps) and trying to learn our way around these tools.” (Iraq)

“We know that WhatsApp doesn’t have high security, so between staff members [we] only communicate through Signal and Wire.” (Egypt)

“Women use our online services, but the number of women has dropped significantly in the initial phases of the lock down, as anonymity (or lack thereof) proved to be an issue, due to insecure applications or some online channels. In addition, [many] women don’t have enough resources to ‘recharge phone credit’ so they can’t afford staying long on the calls for the counselling sessions to be completed. There are [also] challenges on the PSS workers and case managers as it is more difficult to give the same kind of quality online as they do face-to-face.” (Lebanon)

“The biggest problem is that we’re not used to working online. We are used to public work on the ground/grassroots level. We are developing strategies for distance working, but the grassroots work will be affected. We can’t reach all women as there are restrictions on women inside their homes, where women do not have enough privacy or space to report any incidents of violence.” (Palestine)

d. The gendered disproportionate impact of stress and anxiety and the collective self-care and well-being of feminist activists

Partner organisations have unanimously agreed that collective self-care and well-being is one of the most prominent issues that need to be addressed, especially in light of the aggravated challenges they are facing.

Our partner in Syria described these challenges as follows:



“Our mental well-being is being taken for granted (our productivity, how we are being treated by donors, the added pressure we have) and this has led to constant stress and anxiety. Additionally, the stigma attached to the virus by society has also been causing a lot of stress.” (Syria)

Partners have all pointed to the complexity of the psychological toll and the intensity of its consequences due to the multiple intersecting burdens of having to assume both care and reproductive roles at the same time, maintaining work-life balance, navigating security challenges/ threats, sustaining feminist agendas and their organisations’ work, coping with the emergency response in light of the pandemic outbreak and managing the set of psychological challenges that have resulted from the quarantine, lockdown, curfew or social distancing measures.

Our partners in Yemen, Palestine and Syria described the challenges being faced by their teams:



“COVID-19 and quarantining represent an additional layer of stress for everyone. The team is spread in many countries but also including Yemen, team members with families are stressed [with] the additional household responsibilities (children at home, cooking, care work), and our Aden team has been struggling to secure the basic needs including water and electricity. The entire team needs psychosocial support.” (Yemen)

“Our staff was working under extreme pressure during the quarantine. In addition to remote working, our staff were also to perform household responsibilities in addition to home schooling of their children. We took notice of that through asking staff to take long weekends, especially during the months of Ramadan, to maintain staff well-being.” (Palestine)

“Staff’s mental well-being is a major concern, as psychological issues are amplified. With working from home, maintaining work-life balance has been completely destroyed. We are organising weekly staff meetings to check-in on each other without discussing work-related matters.” (Syria)

e. Significant shifts in multilateral spaces for advocacy

The spaces that partners and feminist activists had previously used to advance their advocacy have been significantly affected by the COVID-19 travel and access restrictions.

All international advocacy events or gatherings scheduled to take place from March 2020 onwards have either been cancelled, suspended, switched to virtual spaces or postponed until further notice. This shift significantly altered feminist organising around international advocacy and lobbying opportunities and spaces, and rendered invaluable face-to-face contact with stakeholders impossible.

Despite these challenges and the uncertainty of how advocacy spaces will be shaped in the near future, many partner organisations have suggested that there is an opportunity now to do more advocacy work, as accessing and communicating with stakeholders may be easier using virtual channels. As our partner in Yemen stated, *“There is an opportunity to do more advocacy now, as stakeholders [Member States] are more willing to meet online.”*

Concluding Remarks

Our consultations revealed that feminist organisations as part of larger civil society spaces in the MENA region are at grave risk for the following key reasons:

- **Challenges are deepening:** Feminist and gender-related issues are being sidelined, some feminist issues of concern have been further exacerbated, marginalised groups are becoming further marginalised and civil society organisations are being made to fill in the service gap resulting from the governments' failure to respond to the pandemic.
- **Spaces are shrinking:** Spaces for civil society actors and feminist activists are at an increased risk due to governments' scrutinising policies (active targeting of activists, silencing and censorship).
- **Donor funding and priorities are changing:** Global economic deterioration and the prospect of a severe recession is causing a shift in donors' agendas and priorities, eventually leading to a reduction in available or flexible funding.
- **Limitations of technology:** Online spaces are now more available but not necessarily accessible (due to connectivity issues, lack of knowledge about or skills to harness these spaces).

When structural root causes are interconnected, feminist agendas must inherently be intersectional across all existing binaries (humanitarian-development, conflict-peace, women-men, etc.), thus defying attempts of NGO-isation (i.e. professionalisation, bureaucratisation and institutionalisation) of social and feminist activism.

Times of global uncertainty are a prime time for feminist planning, organising and strategising to address structural discrimination and injustices to achieve feminist peace.

Recommendations

Based on the results of our consultations and through extensive discussions with partner organisations, WILPF is putting forward the following recommendations to advance the stability and progress of feminist organisations and movements in the MENA region.

1. Address and highlight the root causes of gender injustices by:

- Supporting an intersectional feminist approach and analysis.** According to partner organisations, as well as other active feminist groups in the region, an intersectional feminist approach must be adopted to analyse the overlapping systems of oppression that brought to light the intersecting challenges (poverty, unemployment, sexual and gender-based violence, racism, sexism, targeting of women human rights defenders, marginalisation of communities, etc.). An intersectional feminist analysis will also be required to structurally and sustainably address these challenges.

- b. Continuing to support women’s rights and feminist organisations’ peacebuilding efforts.** Some partner organisations, namely in Libya, Yemen and Syria, have reflected on peace processes and efforts from a feminist perspective, stressing the need for such processes to be inclusive and sustainable. Partner organisations have supported the global call for ceasefire, and for immediate and permanent cease of hostilities and military operations. However, they reiterated that a ceasefire alone is not enough, if not accompanied with states’ commitments and efforts to ensure full, effective and consequential participation of women’s groups and civil society organisations in the midst of and beyond the pandemic.
- c. Exposing fault lines and holding governments accountable.** Partner organisations have reiterated the need to establish clear accountability lines of all causes and consequences pre-, during and post-COVID-19, which have resulted in compounded gendered impacts due to the defaults and failures of these governments’ oligarchic, capitalist and exclusionary governance systems.

2. Strengthen and sustain regional (and locally-driven) comprehensive intersectional feminist agendas by:

- a. Providing flexible and responsive funding.** All partner organisations stated that core and flexible funding is crucial to ensuring that women-led feminist organisations continue to exist, organise and mobilise to challenge power structures. Resourcing women and feminist organisations is an act of solidarity. Donors should ease restrictions and requirements and increase flexible funding.
- b. Providing spaces for women’s rights and feminist organisations to convene and share analysis, successes, struggles, lessons learned and experiences.** Most partners echoed the need for cross-regional exchange, sharing experiences, expertise and lessons learned among others. International organisations should also create measures for the input of women and feminist organisations to be included in the planning, implementation and monitoring of COVID-19 response strategies.
- c. Addressing, from a feminist perspective, the disproportionate gendered psychological impact and toll on women’s rights and feminist organisations’ team members, and the impact of the organisations’ sustainability – and, in the worst cases, their existence.** Increasingly struggling with the double burden of maintaining feminist work in an increasingly pressurised environment while maintaining their expanding care role resulting from lockdown measures, women and feminist activists are reaching a point of burnout.
- d.** This urgent situation needs to be addressed by providing and sustaining contextualised feminist collective care, in order to ensure the well-being of women leading change and avoid the collapse of spaces for advancement of the feminist peace agenda.
- e. Supporting transformative feminist leadership and agendas.** Feminist organisations and women’s groups must be appropriately supported and resourced with the needed analytical frameworks, tools and spaces for thematic discussions, enabling them to strategise and move forward in their respective coordination channels as needed. This resourcing must be contextualised, collaborative and needs-based.

3. Amplify women’s rights and feminist organisations’ voices and agendas through alternative advocacy mediums by:

- a. **Increasing partners’ virtual capacities.** Investments to help feminist organisations access and use online tools, as well as design online advocacy messaging and campaigns, will enable these organisations to maximise use of virtual spaces and tools for effective online advocacy. Funds should be made available and flexible for organisations to protect their online security and sustain their access to the internet.
- b. **Creating, finding or otherwise leveraging linkages.** Establishing or strengthening linkages or relationships between women’s rights and feminist organisations and existing online advocacy opportunities (for both targeted and *ad hoc* advocacy) will advance collective efforts in pursuit of the feminist peace agenda.
- c. **Demanding stakeholders move beyond their comfort zones.** When engaging with women’s rights and feminist organisations, stakeholders must demonstrate ability and willingness to accommodate non-traditional advocacy mediums in order to reach new and bigger audiences.

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Egypt

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ASUDA

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ABAAD

Libya

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Palestine

Women’s Center for Legal Aid and Counselling (WCLAC)

Syria

Badael

Dawlaty

Syrian Female Journalist Network (SFJN)

Women Now for Development

The Syria Campaign

Release Me

Radio Souriat

Syrian Feminist Society

Syrian Women Network

Women Support Unit

Yemen

Peace Track Initiative (PTI)

This report adopts a feminist lens in analysing the root causes behind the short- and long-term impacts of the COVID-19 pandemic on feminist movements and agendas in the MENA region.

The report highlights the compounded risks facing women's rights and feminist organisations, and is designed to provide multi-disciplinary stakeholders and activists at both regional and international levels with a concrete set of recommendations to adopt inclusive and responsive policies, with the overall aim of advancing the stability and progress of feminist organisations, movements, and agendas in the MENA region.



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