

COVID-19 IMPACT ON GENDER-BASED VIOLENCE



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THE SOCIO-ECONOMIC AND HEALTH IMPACT OF COVID-19 ON SEXUAL AND GENDER-BASED VIOLENCE (SGBV) IN GHANA

THE ISSUE

Pandemics such as COVID-19 compound prevailing gender inequalities and vulnerabilities, increasing risks of abuse. During an epidemic, women and girls may be at higher risk of experiencing intimate partner violence and other forms of domestic violence due to heightened tensions in the household. In 2016, approximately 27.7 per cent of Ghanaian women had experienced at least one form of domestic violence (physical, economic, psychological, social and sexual violence).

EVIDENCE: Domestic violence in an ordinary time

Countries such as South Africa, France and Germany that have had lockdown measures in place for a while have seen a marked rise in domestic violence. In 2008, a study conducted by the Demographic and Health Survey in Ghana revealed that 38.7 percent of married Ghanaian women between the ages of 15 and 49 had experienced physical, emotional or sexual violence by a husband or partner at some point in their lives. **Considering these statistics even in an “ordinary” period, domestic violence has a high tendency of increasing during the COVID-19 lockdown in Ghana and is very likely to go unreported.**

In the context of Ghana, the 2016 national survey reported how attitudes, beliefs and practices have led to violent actions against women being dismissed due to widespread beliefs that women give up their rights to their husbands at the point of marriage, particularly when bride prices are paid. Many married couples are spending more time at home in partial lockdown as a result of COVID-19. The patriarchal system of the Ghanaian society excuses domestic violence such that, victims of intimate partner violence are less likely to see

Highlights

- Domestic violence has a high tendency of increasing during the COVID-19 lockdown in Ghana and is very likely to go unreported.
- The consequences and costs of domestic violence may include healthcare costs (mental and physical) to the survivor and her family, employment and financial difficulties which will also impact on children.
- It must be ensured that the response plans to COVID-19 in Ghana are grounded in sound gender analysis.
- Barriers must be removed, to enable women and girls' access to services, including psychosocial support services.
- Domestic violence helpline, 055 100 0900 activated by DOVVSU in partnership with UNFPA, must be widely publicized.
- Government's national call center should be equipped with dedicated lines for reporting SGBV and linked to the DOVVSU hotline.
- Safe spaces should be designated for women where they can report abuse without alerting perpetrators, for example, in supermarkets, pharmacies etc.
- Local communities and leaders at all levels should also be engaged.
- Donors should allow programmatic flexibility with current funds and provide additional resources to respond to the issues of GBV during and in the aftermath of the pandemic.

their situations as an emergency that needs to be reported.

Furthermore, the COVID-19 pandemic has brought a disruption to economic activities, especially affecting the self-employed who have been forced to temporarily shut down in some cases. The interruption of sources of income has placed both financial and psychological burden on breadwinners, who are mostly men. This may also translate to heightened tension leading to violence.

POSSIBLE IMPACT

Possible reduction of life-saving care and support to gender-based violence survivors

In times of crisis, women and girls may also face increased risks of other forms of gender-based violence including sexual exploitation and abuse. In addition, life-saving care and support to gender-based violence survivors (i.e. clinical management of rape, mental health and psycho-social support) may be cut off in health care response when health service providers are tasked to prioritize COVID-19 cases.

Violence (e.g. economic) against women has undermined efforts to realize the Sustainable Development Goals (SDGs) as it hinders poverty reduction efforts and has inter-generational consequences. Intimate partner violence also undermines women's ability to exercise their reproductive rights with grave consequences for maternal and child health. The consequences and costs of domestic violence may include healthcare costs (mental and physical) to the survivor and her family, employment and financial difficulties which will also impact on children.

Children who witness domestic violence are more likely to have emotional and behavioral problems, perform poorly in school and be at risk of perpetrating or experiencing domestic violence later in life. Domestic violence victims are most vulnerable during these unprecedented times, as access to justice will be generally slowed down and judicial resources may be spread thin.

SOCIO-ECONOMIC RESPONSES/ POLICY OPTIONS

Strengthening systems, including community structures that protect women and girls

As systems that protect women and girls, including community structures may weaken or break down,

specific measures should be implemented to protect women and girls from the risk of intimate partner violence with the changing dynamics of risks imposed by COVID-19.

Continuity of care must be ensured in the case of severe interruption or disruption of access of women and girls of reproductive age to facilities and services. Thus, barriers must be removed, to enable women and girls' access to services, including psychosocial support services, especially those subject to violence or who may be at risk of violence in quarantine.

There is also a need for agencies to work closely with Government and national partners to ensure that accurate information is provided to women, including those of reproductive age and pregnant women, on violence prevention, potential risks and how to seek timely medical care, as well as protection from gender-based violence.

At a global level, for the nearly 48 million women and girls, including 4 million pregnant women identified by UNFPA as in need of humanitarian assistance and protection in 2020, the dangers that the COVID-19 outbreak pose will be magnified. Conflict, poor conditions in displacement sites, and constrained resources are likely to amplify the need for additional support and funding.



CONCLUSIONS/RECOMMENDATIONS

Ghana should prepare for possible surges of GBV, intimate partner violence, sexual exploitation and violence such as assaults, rape and incest during and after the restrictions. Thus, the domestic violence helpline, **055 100 0900** activated by DOVVSU in partnership with UNFPA, needs to be widely publicized on various media platforms and agency websites. Additional funding needs to be secured to make the helpline toll-free in order to remove all barriers to access. To ensure effective coordination, the Government’s national call center should be equipped with dedicated lines for reporting SGBV and linked to the DOVVSU hotline. Personnel also need to be trained and deployed to managing this hotline to ensure its effectiveness in supporting victims of GBV.

In addition to the hotline, safe spaces should be designated for women where they can report abuse without alerting perpetrators, for example, in supermarkets, pharmacies etc. In addition, gender-based violence referral channels must be developed, and existing ones updated to reflect changes in available care facilities, while key communities and service providers need to be informed about those pathways.

Moreover, GBV prevention strategies should be integrated into the operational plans of the justice and security sectors during the crisis.

Local communities and leaders at all levels should also be engaged to ensure access to information and to properly identify risks of SGBV and support mitigating measures. It must be ensured that the response plans to COVID-19 in Ghana are grounded in sound gender analysis, taking into account gendered roles, risks, responsibilities and social norms, in a way that they will not reproduce or perpetuate harmful norms, discriminatory practices and inequalities. As such, Government and Donors should require that all funding proposals contain comprehensive gender analysis and provisions for mainstreaming protection. Donors should allow for programmatic flexibility with current funds and provide additional resources to respond to the issues of GBV during and in the aftermath of the pandemic.

By UNFPA Ghana

