

THE FIRST 100 DAYS  
OF COVID-19 IN ASIA  
AND THE PACIFIC:  
A GENDER LENS

# EXECUTIVE SUMMARY:

## WHAT DO WE KNOW

### 100 DAYS IN?

The outbreak of the new coronavirus (COVID-19) was first reported in Wuhan, China on December 31, 2019. Since then a global pandemic has been declared, with countries across the globe mobilizing to respond to the health crisis and manage the significant socio-economic impacts.

This document highlights what we know about the gender impacts of COVID-19 in the Asia-Pacific region thus far. One hundred days since the first case was reported, we closely follow and contribute to the health response initiated by governments in the region and supported by the international community. While not all impacts of this pandemic are clear at this time, and the situation is evolving rapidly, it is clear that the gender and social inequalities that underpinned societies before the pandemic are now exacerbated, making bad situations for women and girls worse. Response and recovery efforts must place the needs of women and girls at the centre, and be grounded in the socio-economic realities that they face.

This document provides a rapid and preliminary review of the gendered impacts of the COVID-19 pandemic 100 days after the first cases were reported to the World Health Organization (WHO). It aims to:

- present a snapshot of the gender dimensions of the socio-economic impacts of the pandemic in the Asia-Pacific region;
- capture promising practices for integrating gender in preparedness and response planning; and
- propose lessons learned and strategic entry points to mitigate the socio-economic impacts for women and girls.

In the first 100 days, we already see that gender inequalities and discriminatory social norms that existed in all countries before the pandemic are exacerbated in this crisis. These gender inequalities will have profound impact on the lives of women and girls in the region. Because of these inequalities COVID-19 will impact women and girls disproportionately to men and boys, and also affect women's resilience in mitigating the effects of the outbreak.

- Women health care workers are at the front line of the health response. Research indicates that there are notable differences between the conditions in which women health care workers operate compared with men, including long-existing inequities in the gender pay gap, women's access to leadership and decision-making roles, and barriers to full time employment.
- Beyond the health impacts, societies are now facing socio-economic concerns, while the human rights implications of the crisis are becoming increasingly clear. The effects of the pandemic are reaching into countries that thus far have fewer confirmed cases but rely on international supply chains. Tens of thousands of women migrant workers, often working in informal employment, have been forced to return to their home countries and are facing stigma and discrimination, in addition to the loss of income.
- More than 37 percent of women in South Asia, 40 percent of women in South-East Asia, and up to 68 percent of women in the Pacific have experienced violence at the hands of their intimate partners.<sup>1</sup> Emerging evidence from this pandemic paints a picture where this is increased. Lockdowns and quarantine measures placed by many countries mean that millions of women are confined with their abusers, with limited options for seeking help and support. Hotlines for victims of domestic violence in Malaysia have reported a 57-percent increase in calls while orders aimed at controlling movement are in effect.<sup>2</sup> In Singapore, AWARE's Women's Helpline has seen a 33-percent increase in February over calls received in the same month last year.<sup>3</sup>

1. Ending Violence is our business: Workplace responses to intimate partner violence in Asia and the Pacific. UN Women, 2019.

- Women are overrepresented in the sectors and jobs which are hardest hit by COVID-19 – manufacturing, textile and garments, care services, hospitality and tourism – and in the most vulnerable types of employment with the least protection, such as workers in the informal employment, including the self-employed, domestic workers, daily wage workers and contributing family workers.
- The increased vulnerability of women in global supply chains – with the collapse of both the demand and supply sides - means that many women workers, including women migrant workers and those working in micro-, small, and medium-sized enterprises, have lost their livelihoods from one day to the next, without any safety nets, financial security or social protection to rely on.
- In Asia and the Pacific, the unequal distribution of unpaid care and domestic work between women and men is a major barrier to gender equality and women’s empowerment. Women and girls spend more time than men and boys on unpaid care and domestic work, ranging from 1.7 times as much in New Zealand to 11 times in Pakistan.<sup>i</sup> Where health care systems are stretched by efforts to contain outbreaks, care responsibilities are frequently transferred onto women, who usually bear responsibility for caring for ill family members and the elderly.<sup>ii</sup>

UN Women in Asia and the Pacific supports partners in driving responses that meet the immediate needs of women and girls while safeguarding and leveraging gains made on gender equality and women’s empowerment, through policy advocacy and programming that incorporate gender-transformative approaches to recovery.

### Immediate response

UN Women is providing gender analysis, data, and expertise to inform regional and national preparedness and response. It is also leveraging its coordination and convening roles for advocacy and accountability to women and girls in the response and mobilizing women’s organizations to reach those left furthest behind with risk communication, and to ensure women have equal voice, leadership, and access to information. Our country offices are engaged in COVID preparedness

planning, including ensuring measures are in place for continued GBV service provision, as well as mobilizing women’s organizations to influence and participate in response work.

### UN Women is taking the following measures to leverage coordination and convening roles for advocacy and accountability to women and girls in response to the COVID-19 crisis:

- Co-leading the Asia-Pacific Issue-Based Coalition on Human Rights and Gender Equality with the UN Population Fund (UNFPA) and the Office of the United Nations High Commissioner for Human Rights, focusing on COVID-19 response and recovery.
- Leveraging the regional Gender in Humanitarian Action Working Group, co-chaired with the Office for the Coordination of Humanitarian Affairs and CARE, to advocate for accountability to women and girls throughout all actions taken in the context of COVID-19 and any further emergencies that emerge.
- At the regional level, jointly developing the following resources with agencies: the regional gender in humanitarian action working group [joint Advocacy Brief on Gender and COVID](#) (launched 10 March), which has been disseminated to regional humanitarian actors and translated for use in multiple regions; and an [inter-agency guidance note on including vulnerable and marginalized groups in risk communication and community engagement](#) (launched March 13), which has been rolled out globally.
- Using existing platforms with the private sector, convening virtual roundtables across the region to fast-track gender-sensitive business response and recovery to COVID-19, and gain commitment from business leaders to putting women’s economic empowerment and resilience at the forefront in times of crisis.

### Women, peace and security

The response to COVID-19 in many countries in Asia and the Pacific is escalating, with serious implications for peace and security, and for the rights of women and girls. The enactment of national emergency powers, introduction of military checkpoints and lockdowns, closed borders, and restrictions on citizens’ movement

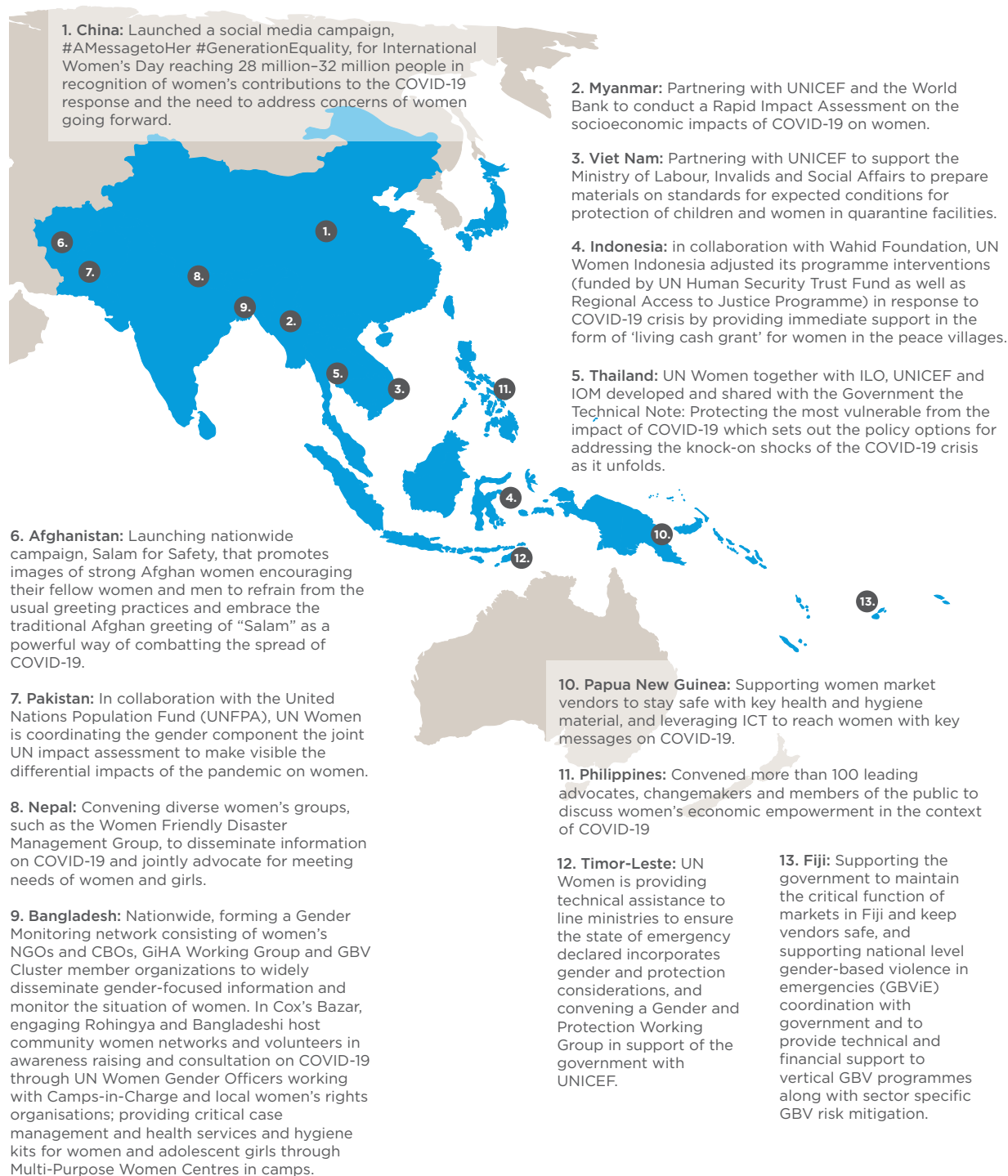
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2. [Virus lockdown causing rise in domestic abuse](#), The ASEAN Post, 30 March 2020; [MCO causes spurt in number of calls to helpline for kids abused](#), 26 March 2020.

3. Commentary: Isolated with your abuser? Why family violence seems to be on the rise during COVID-19 outbreak, CNA, 26 March 2020.

**FIGURE 1**

**Highlights of UN Women's engagement in the response to date**



and speech in many countries all mirror a governance context similar to that of conflict settings, which can have profound and disproportionate impacts on women and girls, amplifying pre-existing inequalities.

Applying the lens of women, peace and security to COVID-19 response will provide valuable guidance on the fundamental need for women's rights and women's leadership to be at the forefront of recovery.

## Gender and disaster risk reduction

Asia and the Pacific continues to be the region most prone to disaster impacts in the world, and as countries cope with the impacts of the COVID-19 pandemic, they also grapple with the reality of exposure to multiple, severe natural hazards, exacerbated by the impacts of climate change, and potential for disasters within disasters.

The gendered impacts of additional disasters within the context of COVID-19 can be anticipated: A Mekong drought, for example, combined with the increased need for hygiene practices such as handwashing in the context of the pandemic, will likely result in significant increases to the unpaid care work burden of women, who are primarily responsible for collection of water for household use. Already, Tropical Cyclone Harold has led to the loss of lives, shelter and livelihoods in the Pacific. The combined impact of TC Harold and COVID-19 will put women at further risk of intimate partner violence, affect women's access to food and shelter, and impact on the livelihoods of women farmers and market vendors.

At the same time, under the Sendai Framework for Disaster Risk Reduction, civil society and governments have done valuable work and provide lessons learned for the integration of gender into disaster risk reduction for all hazards, including biological hazards such as the COVID-19 pandemic.

## Women's economic empowerment

Emerging numbers indicate that the COVID-19 may be more lethal for men.<sup>4</sup> However, women are taking the bigger socio-economic hit from the global pandemic. Women are disproportionately affected because they are overrepresented in precarious employment, including in the informal sector, where their benefits and protection are inadequate or lacking. COVID-19 is already having major impacts on women across entire supply chains – executives in large companies, women working in the service sector, women who own or work in small and medium-sized enterprises (SMEs), women engaged

in manufacturing, including the informal sector, and women migrant workers. This is also accentuated by the uneven division of care and domestic work at home due to gendered social expectations, limiting even more women's livelihood choices. These imbalances are further heightened when schools and businesses close, and where women need to care for children, the elderly or ill family members.

Moreover, women-run SMEs are particularly exposed to unexpected risk derived from this economic shock owing to factors such as limited access to financial services and services for information and communications technology (ICT) as well as disrupted access to national and international value chains.

The COVID-19 pandemic will also disproportionately affect migrant women workers across Asia and the Pacific, in particular those with irregular migration status. The risks of facing discrimination, exploitation and the violation of their human rights are exacerbated due to suddenly tightened travel restrictions and other measures to control the pandemic.

## Addressing violence against women

Women, girls, and vulnerable groups are at an increased risk of gender-based violence (GBV) during public health emergencies, such as COVID-19, due to limited input and control in decision-making on a household's response, and to shifts in social safety nets, mobility and access to information and services.<sup>5</sup>

Life-saving care and support to GBV survivors may be disrupted when front-line service providers and systems, such as health, policing and social welfare, are overburdened and preoccupied with handling COVID-19 cases. Restrictions on mobility also means that women are particularly exposed to intimate-partner violence at home, with limited options for accessing support services. In addition, having law enforcement and security forces in the streets in some countries to monitor the movement of people can lead to higher levels of sexual harassment and other forms of violence in public spaces.

UN Women in Asia and the Pacific is leveraging its experience in these areas of work to meet the immediate needs, and ensure that the world post-COVID is built on principles of human rights and gender equality. We do this to protect the gains made on gender equality and women's empowerment and ensure that recovery is centred on the principle of leaving no one behind, and on approaches that are gender-transformative.

4. <https://blogs.bmj.com/bmjgh/2020/03/24/sex-gender-and-covid-19-disaggregated-data-and-health-disparities/>

5. [Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action, GBV AoR.](#)