CENTER for REPRODUCTIVE RIGHTS

April COVID-19 Landscape: SRHR and Gendered Issues in Asia

As the public health effects of COVID-19 have been intensifying throughout the world, the Center, along with several key figures, has been working to protect sexual and reproductive health care. Because health systems are strained, these services have seemed to take a backseat in order to tend to the growing pandemic. Below is a brief overview of the current landscape of SRHR resources in Cambodia, Bangladesh, India, Myanmar, Nepal, Pakistan, Philippines, and Sri Lanka as reported in the month of April. In addition, this also provides a brief snapshot of the social and economic issues many women and girls are facing during this crisis, calling for a more nuanced and gender-based approach to safety measures. This document does not aim to reference every SRHR development in the eight Asian countries.

Please click here for the Center's COVID-19 related resources page. The statements led and/or endorsed by the Center this month are the following:

- SARJAI statement
- RHRWG statement (Nepal)
- PAPAC statement (Pakistan)

*If you have relevant SRHR news and resources that you think we should have included here or should highlight in our next newsletter, please email them to zkilik@reprorights.org.

Cambodia

Several CSOs in Cambodia, along with the Royal Government, relevant stakeholders, and citizens, have released a joint position paper calling for the prioritization of the needs of those who are most at risk of GBV during the pandemic. [CCHR]

Bangladesh

The Rohingya refugee camps in Cox's Bazar, Bangladesh, are under threat of an added "humanitarian crisis" during the coronavirus pandemic. UN Women is now working with Rohingya volunteers to aid female health workers and refugee populations. [UN Women] As primary caregivers, women and girls are more susceptible to contracting the coronavirus as information is not widely available in these camps. According to UN Women, "as of early April, Rohingya women mobilizers had already reached 2,863 community members within a week." Additionally, The GiHA WG, Protection Sector, Child Protection and GBV Sub-Sectors and the PSEA Network, have released a joint statement calling for gender actions in the COVID-19 response in Cox's Bazar. [Humanitarian Response] Information and resources are scarce in these communities, so recommendations have been given to facilitate more accessible information. Reports of domestic and sexual violence within these camps have also increased. [Human Rights Watch]

The Family Planning Association of Bangladesh (FPAB) and the International Planned Parenthood Federation are working together to deliver SRHR services. [IPPF] Following the shutdown of services on March 26, 2020, 21 FPAB clinics have remained open with heightened screening measures. Although personal protective equipment (PPE) has been in low supply, a UNFPA-supported government maternal health program provides midwives with the equipment necessary by the World Health Organization's guidelines. [UNFPA]

India

Sama, a resource group for women and health, has compiled an exchange of information on their site to provide women with resources for issues such as mental health, domestic violence, and maternal health [Sama]. A petition filed by Sama to highlight the denial of healthcare particularly delivery/child birth services to pregnant women in Delhi resulted in an order from the Delhi High Court directing the government to ensure that a helpline number is set up for the benefit of pregnant women in the city [Sama]. As hospitals are overrun with capacity, those who are pregnant and are in need of SRH services are struggling to find safe and effective facilities. In an article on Express Healthcare, Ipas' Senior Director Anisha Aggarwal stated that many healthcare facilities have been converted to COVID-19 hospitals, therefore calling for widened telemedicine and medical abortion services for pregnant individuals. [Express Healthcare]

Following the trend seen in many other countries within the Asia-Pacific region, India has experienced an increase in domestic violence cases. A Quartz India article stated that "confinement at home with an abusive partner is likely result in greater physical and emotional violence against women, with disastrous consequences for their health and well-being." [Quartz] In addition to this, women and girls' domestic role and primary caregivers results in an imbalance of workload in the home. As a result, many groups and publications are calling for a more nuanced, gendered re-evaluation of the COVID-19 mitigation strategy. [The Week, Outlook India, Deccan Herald] The All India Council of Human Rights, Liberties & Social Justice (AICHLS) has submitted a petition to the Delhi High Court calling to implement measures for domestic violence victims during the lockdowns. [The Hindu]

Myanmar

UNFPA Myanmar has conducted and online training for Mental Health and Psychosocial support. In their announcement they stated: "... it is important to ensure the psychological wellbeing of groups at risk such as women, girls, youth and adolescent[s]. [UNFPA 1] As UNFPA works to empower young people, women and girls and to support comprehensive healing and reintegration of GBV survivors, mental health and psycho-social support is an integral part of UNFPA's programming for GBV prevention and response." Additionally, they have also released a statement stating that they will work with the Government of Myanmar to ensure that the health and rights of women and girls are protected throughout the country. [UNFPA 2]

Nepal

Nepal's Reproductive Health Rights Working Group (RHRWG), national network of various organizations took proactive step calling for government to ensure access to SRHR services during the pandemic. On April 3, RHRWG issued a joint statement highlighting constitutional and human rights obligations of the government to ensure SRHR.

In April, two Provincial hospitals in Nepal (Seti Province Hospital and Gandaki Province Hospital) decided to discontinue the Reproduction Health Services including, Maternal Health, Abortion, Contraception

and other RH as the hospitals has been converted to COVID-19 treatment center and the hospital management decided to use the spaces of Maternity Ward for COVID-19 treatment. The hospitals issued notice that Reproductive Health Services including Antenatal, Postnatal, Contraception, Abortion, Delivery and other RH related services will be stopped, effective immediately, for unforeseeable time. The RHRWG network opposed the decision of Province Governments and Hospital Management and registered a joint statement (letter of objection) in the Province Governments, Hospital Management, Sub-metropolitan Offices, and Department of Health. After the registration of the letter the hospital decided to resume the Maternal Health Services including all RH services immediately in the Hospital. [Sarangi News, Nepal Sandary, Paschim Today]

The Ministry of Health and Population has developed an interim guideline on essential health service during COVID-19 which includes SRH services [Interim health service guideline]. However, despite the guideline and the message by the spokesperson of the Ministry that these services and essential and should be available, there has been many cases where the services are denied [Himalayan Times] and the guideline has not been properly implementation. In this context with the support of the Center, RHRWG has made a short video with the message of the spokesperson of the Ministry to publicly share the message from the government.

An IPS op-ed illustrates the unfortunate reality of interpersonal violence, domestic violence, and sexual violence among women and young girls. Victims can receive support from remote organizations like the Family Justice Centres and Shine-Foundation.org, both based in NYC. [IPS News] UNICEF, ILO, and UN Women released a joint statement outlining the economic, social, and domestic inequalities faced by women and girls in Nepal. [UN Women] Fortunately, the Nepal Government has set forth measures to ensure that reproductive health care is provided, and most importantly that these rights are protected, during the pandemic. [IPPF]

Pakistan

The Rahnuma Family Planning Association of Pakistan expressed that the coronavirus' stain on hospital systems has not fared well for SRH services. [IPPF] During this time, SRH services have been characterized as "non-essential or elective", therefore widening the gaps in these services. In addition to this, the safety of women at home has been called into question. Articles from the Asia Pacific UNFPA, The Express Tribune, and The News International illustrate the unfortunate threat of domestic violence. [Tribune, The News] Resources, such as the Women Safety app, provide aid to women under threat of violence at home. [UNFPA] This app, which was launched by the Punjab Safe Cities Authority (PSCA) two years ago, offers an immediate response for women under threat of domestic and interpersonal violence.

Philippines

The Philippine government was urged by a legislator to provide free reproductive health supplies and services for marginalized groups during the quarantine orders. [News Info] Citing the Reproductive Health Law under the Philippines National Drug Formulary System, the FDA certifies that contraceptives are essential medications. Fortunately, President Duterte has assumed that family planning services, such as informational resources, contraceptives, and reproductive health supplies, will remain uninterrupted. [GMA News] The COVID-19 Response program of the UNFPA has published a report outlining and calling to action the services and resources needed for Filipino women and girls amidst this pandemic. This report highlights the worsening inequalities for women and girls during this time, and a disproportionate effect of economic and social stress. [UNFPA] In response to this, Lunas Collective – "a feminist, inclusive chat service for Filipinos seeking support related to gender-based violence and

reproductive health"—was launched [Inquirer]. This service is run by volunteers who offer a listening ear to victims and provide referrals to mental health counselling and reproductive health specialists.

As hospitals and clinics are operating over capacity, SRHR services seem to be cast aside. This poses a serious threat to an individual's reproductive well-being. A Caloocan woman sadly passed away after being rejected by six hospitals, when looking for treatment following a complication after birth. [GMA News]

Sri Lanka

In an interview with IPPF, the Executive Director of the Family Planning Association of Sri Lanka (FPASL), detailed how the FPASL has implemented procedures to provide SRH services and informational resources. [IPPF] She states that due to the pandemic, "the contraceptive injection (Depo-Provera) and other family planning methods that they need have been most affected. And abortion related-counselling and post-abortion care are non-existent." Curfews and limited medical supplies have proven to be barriers in accessing these services. [Magzter]

General Updates/Resources

- UN Women: The First 100 Days of COVID-19 in Asia and the Pacific: A Gender Lens
 This report provides a detailed summary of the gendered impact of the coronavirus pandemic, following the first report of the outbreak in Wuhan, China on December 31, 2019.
 Unfortunately, the publication affirms that women and girls are disproportionally affected by COVID-19 in the Asia-Pacific region.
- UNFPA Asia & the Pacific: New UNFPA projections predict calamitous impact on women's health as COVID-19 pandemic continues
 UNFPA: Millions more cases of violence, child marriage, female genital mutilation, unintended pregnancy expected due to the COVID-19 pandemic
 UNFPA: Impact of the COVID-19 Pandemic on Family Planning and Ending Gender-based Violence, Female Genital Mutilation and Child Marriage
 Citing the findings of an April 2020 UNFPA report, a UNFPA press release and news article show that women and girls will be further affected by restricted access to SRH services and harmful practices due to the strain on hospitals and clinics. Both publications also highlight that female genital mutilation practices, child marriage, and gender-based violence are predicted to skyrocket as programs working to prevent these horrid situations are being disrupted.
- CARE International: How CARE is responding to the 'Invisible Pandemic' behind COVID-19
 CARE-supported projects throughout several countries, including Myanmar, Nepal, and
 Bangladesh, have proven to be successful in preventing further gender-based violence. Their
 partnership with Myanmar's government and service providers, Bangladesh's SHOUHARDO, and
 Nepal's Safe Justice Project have created accountable institutions that will provide services and
 protection for women and girls during the COVID-19 pandemic.