COVID-19 and Sexual and Reproductive Health and Rights in Asia

April - June 2021

In this newsletter, the Center, along with its key partners and allies, continues to track the impact of COVID-19 on the sexual and reproductive health and rights in the region.

This newsletter contains a brief overview of the current landscape of SRHR resources in Cambodia, Bangladesh, India, Myanmar, Nepal, Pakistan, Philippines, Sri Lanka, Indonesia, Thailand, Malaysia and Vietnam as reported over the period from April to June 2021. It 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 and recovery responses.

Please click <u>here</u> for the Asia program's COVID-19 related resources page. This is our seventh newsletter on the impact of the current health crisis on the sexual and reproductive health and rights (SRHR) in the region.

This document does not aim to reference every SRHR development in the twelve Asian countries. If you have relevant SRHR news and resources that you think we should have included here, please email them to <u>asiaprogram@reprorights.org</u>.

I. Gender-Based Violence (GBV)

The COVID-19 pandemic has further exacerbated the problem of violence against women:

- In India, crimes against women rose by 7% in 2020 and after just two months in lockdown, domestic violence complaints rose by 131% [Feminism India];
- Since the first lockdown in Nepal, a total of 2,022 cases of violence against women were reported through the National Women's Commission's free helpline for GBV survivors [UN WOMEN];
- Similarly in Vietnam, the number of calls about GBV received by the hotline for the Central Vietnam Women's Union increased by 50% during lockdowns [<u>Modern Diplomacy</u>]; and
- In Bangladesh, a survey of 27 districts showed that 4,249 women were subjected to domestic violence in April 2020. Of these survivors, nearly 40% faced violence for the first time in their lives, often citing the lockdown as the cause [*New Age Opinion*].

It has been noted in articles about both Nepal (in <u>the Kathmandu Post</u>) and Vietnam (on <u>relief web</u>) that the fact that these statistics are rising despite restriction to movement highlights that the majority of perpetrators involved are family members and acquaintances, whose actions are compounded by heightened stress and tensions in the household.

In Pakistan, new legislation was passed in Khyber Pakhtunkhwa and all four provinces are now equipped with legislation that will strengthen prevention and protection measures for the survivors of domestic violence. This includes reiterating the state's commitment to providing refuge and protection to survivors [DAWN].

Following the outbreak of a fire in Kutupalong mega Rohingya camp, Bangladesh, on 22 March 2021, a number of child- and women-friendly spaces were significantly damaged. COVID-19 had already increased the risks relating to gender-based violence for refugees living in these camps, and the fire

exacerbated these existing risks, further exposing women and children to additional threats to their personal safety [*reliefweb*].

In Indonesia, a total of 198 community meetings across 16 locations were facilitated to increase knowledge and understanding on GBV prevention, including referral mechanisms [UNFPA].

II. Sexual and Reproductive Health

Family planning and reproductive health services were severely disrupted during the country-wide lockdown in India in 2020, leaving an estimated 25 million couples in the country without access to contraceptives [*DNA India*]. In Myanmar, access to these services are similarly difficult in light of the coup coupled with the disruption caused by the COVID-19 pandemic. This will have significant impacts on women's long-term health [*UN*].

Sweden has committed 6 million Swedish kronor to support UNFPA programmes in Bangladesh which are focussed on improving the availability of sexual and reproductive health services in the country throughout the pandemic [*The Daily Star*].

Managing menstrual health has become very challenging during the pandemic. A survey conducted by Menstrual Health Alliance India found that almost 82% of NGOs engaged in distribution had either no or severely restricted access to sanitary pads due to non-operational production units [King's College London]. In Indonesia, while menstrual health remains a taboo topic, Plan International has introduced a partnership with a reusable menstrual brand 'Modibodi' to address the challenges in accessing period products [Plan International].

In seeking to improve female sex workers' health during the pandemic, UNFPA and their partners in Indonesia have moved outreach programs online (using social media and WhatsApp), introduced oral fluid tests as HIV self-testing tools and mobile condom outlets [UNFPA Indonesia].

III. Maternal Health

According to UNICEF, COVID-19 led to a 50% decrease in maternal and child health service uptake across Bangladesh [<u>UNICEF</u>]. In Nepal, institutional births reduced by over half during lockdown [<u>bmi</u>], with over twice the number of maternal deaths typically recorded in Nepal in the first 2 months of Nepal's lockdown [<u>The Kathmandu Post</u> and <u>Amnesty International</u>]. Lockdown has also exacerbated the supply of misoprostol in Nepal, restricting lifesaving treatment of postpartum haemorrhage and medical abortion [<u>bmi</u>].

In three municipal corporations in Delhi, 35-42% of births in January to February 2021 were registered as home births as compared with less than 10 % 2019. Evidence shows that the risk of postpartum haemorrhage, the primary cause of maternal deaths in India, increases in cases of home births [*Swachh India*]. A review by The Lancet Global Health has also revealed that the rate of stillbirths has increased during the pandemic. [*The Indian Express*]

An article published in the Pakistan Journal of Medical Science concluded that the collateral damage of COVID-19 was so great that some critical service – including maternal and neonatal essential services - should never have stopped [Pak J Med Sci].

A study of 2,100 pregnant women across 18 countries conducted by INTERCOVID has revealed that women who contract COVID-19 whilst pregnant are 50% more likely to experience pregnancy complications [*Bloomberg Quint*]. The Government Institute of Medical Sciences in India have evidence that pregnant women are experiencing scarring on their lungs after contracting COVID-19. [*The Economic Times*].

In the Philippines, a woman gave birth on the road after being refused admission for her inability to pay for the costs of a COVID-19 test. The woman was turned away by one hospital and two lying-in clinics. While the Department of Health has previously asked hospitals not to refuse treatment for pregnant women, it also said that COVID-19 tests are for their and the hospital's staff protection. [Inquirer]

IV. Adolescents' Sexual and Reproductive Health

There has been a drastic rise in unplanned pregnancies in the Philippines. In response, the Commission on Population and Development is implementing a social protection program for young Filipinos who have become first-time parents during the pandemic [Inquirer]. An executive order was also issued by the President of the Philippines declaring teen pregnancy as a national priority and called for the "mobiliz[ation] of existing coordinative and legal mechanisms related to the prevention of adolescent pregnancies, and to strengthen the adolescent's capacity to make autonomous and informed decisions about their reproductive and sexual health by ensuring access to comprehensive sexuality education and reproductive health and rights services". [Gazette]

According to a research published in May 2021, digital technology may be able to be taken advantage of to eliminate child, early, and forced marriage and reduce adolescent pregnancy in Asia-Pacific. The report published by Plan International found that use of online platforms and methods can have multiple benefits in educating and empowering girls and young women. [reliefweb]

V. Gender Equality

A paper published in the Health and Human Rights Journal ("Fault Lines of Refugee Exclusion: Statelessness, Gender, and COVID-19 in South Asia") considers that far from being a 'great equalizer', COVID-19 has reflected and reinforced pre-existing hierarchies [*Health and Human Rights Journal*]. Another paper, titled "Working towards an "Equal Future" in COVID-19" reflects on Bangladesh's 50th year as an independent nation, and calls for increased focus on eradicating violence against women in the interests of pursuing gender equality [*Bangladesh Institute of Peace and Security Studies*].

Nepal's Gender in Humanitarian Action Task Team held a meeting on 20th May 2021 to discuss the immediate needs and challenges during this time, which include: cash support, safety from GBV, LGBTIQ+ safe isolation spaces, and childcare support [*Gender in Humanitarian Action Task Team*]. The Action Task Team also reflected on lessons from the key challenges from 2020 in a paper published in June [*Gender in Humanitarian Action Task Team*].

An article in the Diplomat notes that despite a quarter of households in Sri Lanka being headed by women, there is no comprehensive national strategy to address their needs during emergency situations like COVID-19 [*The Diplomat*].

The underlying structural gender inequalities in Asia and the Pacific have been exacerbated by the COVID-19 pandemic. In particular, lockdowns have disrupted sexual reproductive health services, leading to a rise in unintended pregnancies, increases in unsafe abortion, and increases in preventable maternal mortality across the region [*Asia Pacific Alliance*].

Legal Empowerment Network have published a report entitled "Gender Justice During and Beyond the Covid-19 Crisis". Research participants in this report observed an influx of GBV cases at the outset of the pandemic. Legal groups can help to relieve these problems by supporting women in their native languages and within hard-to-reach communities, building trust with people who are often beyond the reach of public institutions [Namati].