

GENDER FOCUSED IMPACT OF COVID-19: CIVIL SOCIETY FINDINGS AND RECOMMENDATIONS FOR RELIEF AND RECOVERY IN RWANDA

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INTRODUCTION

This statement reflects the views of a range of national and international civil society organizations (CSOs) operating in Rwanda. As women-led or gender-focused organizations, we have a passion and explicit focus to employ gender transformative approaches in our operations and programming.¹ Since March, we have been on the frontlines of the response to COVID19 and have been closely following the developments of recovery efforts.

We commend the Government of Rwanda's (GoR) will and efforts in COVID-19 prevention and response. GoR's swift response to contain the pandemic in Rwanda and to support the most vulnerable during lockdown has saved countless lives and enabled the country to safely reopen. Enforcement measures of the GoR and World Health Organization have enabled Rwanda to resume daily life swiftly and safely. Early on the Government released an Economic Recovery Plan with a significant focus on social protection, providing a basis from which to support vulnerable Rwandans to begin rebuilding their lives.

During the COVID19 crisis CSOs have been collecting information from programme participants and CSO partners on the gendered impact of COVID19 and the associated lockdown measures. This statement focuses on four key areas identified commonly by organizations - gender based violence (GBV), girls education, women's access to finance, and women's voice and participation in relief and recovery. Our intention for this statement is to amplify women and girls' voices and complement existing analyses and advocacy efforts in Rwanda, the United Nations and Development Partners.

Combined, we can ensure coordination to make the COVID19 response, relief and recovery in Rwanda gender transformative.

¹ International NGOs are represented by the Network of International Non-Governmental Organizations (NINGO) Women's Empowerment and Gender Equality (WEGE) Technical Working Group (TWG), which is comprised of 19 INGOs operating in Rwanda. TWG seeks to amplify and strengthen the contributions of NINGO members and CSO partners to transform gender inequalities and promote the empowerment of women and girls in Rwanda.

SUMMARY OF RECOMMENDATIONS

Leadership & Coordination: We strongly advocate for National Civil Society and the Network of International Non-Governmental Organizations (NINGO) to be represented on the Steering Committee for national recovery. We advocate for MIGEPROF to play a strong role coordinating dialogue between the Government and civil society on gender focused recovery plans and implementation. The Gender Monitoring Office (GMO) should play a strong role leading analysis and monitoring including through comprehensive gender audits on response programming. At District and sector level, gender-focused local organizations and National Women's Council (NWC), National Council of Persons with Disabilities (NCPD), and National Youth Council (NYC), National commission for children (NCC) should have a voice in planning and implementation of recovery efforts. Women community leaders should have a clear voice in all planning, implementation and monitoring as experts in gender issues affecting women at grass root levels.

Expanded space for dialogue: Women-led and women-focused civil society, must persistently be provided meaningful space to dialogue with the Government and Development Partners in policy reviews, implementation of the economic recovery plan and rebuilding of the economy at national, district and local levels. Women and girls, especially those facing double discrimination due to gender and disability intersections, should be included in community based coordination mechanisms and structures for prevention, preparedness and response related to the COVID-19 pandemic, so that their specific needs are recognized, understood and addressed.

Allocation of funding: Standard gender and disability budgeting practices should be adhered to in all response programming, including District-level budgets, which should ensure that they allocate funding to address the most prevalent issues around GBV, including case management (and clearly outline these in performance contracts).² Development partners should provide funding specifically for gender-stand alone programming in accordance with the acute gendered needs outlined in this statement. There should be allocation of adequate financial resources to CSOs working closely with communities, to allow them to provide necessary support in terms of access to quality health care (including sexual and reproductive health), response to domestic violence and support to victims and access to justice.

To complement Government-led national programs, NGOs and CSOs should be supported to find innovative solutions to the new problems facing girls and women, and address the needs of those who may slip through the gaps of existing programs or face specific problems/complex issues. This includes addressing health and education of at-risk adolescent girls, and (in addition to Isange One Stop Centres and RIB's efforts), offer additional options for response and protection from GBV including women driven and women led shelters.

² [Rwanda commitment No 4 from the Global Disability Summit](#): By 2020/2021 The Government will launch a national , annual disability budget tracking process , to ensure spending on disability interventions and mainstreaming is monitored across the government.

GENDER BASED VIOLENCE: PREVENTION, RESPONSE AND ACCESS TO JUSTICE

The COVID-19 pandemic exposes women and girls to different kinds of violence and exacerbates gender-based violence. During the COVID19 lockdown in Rwanda it was difficult to understand from official reports if the rates of GBV had increased and in what form. HAGURUKA recorded a **75% increase** in GBV reported cases in relation to previously recorded cases. The stay-at-home restrictions and other measures that restricted movement of people contributed to an increase in sexual and gender-based violence. Women and girls already in abusive situations were more exposed to increased control and restrictions by their abusers, with little or no recourse to seek support.³

We stress that it is still unlikely to understand the magnitude or scale of GBV during COVID-19 lockdown in Rwanda as is the case in many other countries around the world. Oxfam found that data from six (6) Isange One Stop Centres shows that physical violence increased by **5%** in two months of lockdown. Physical violence experienced by men actually increased by **6%** and decreased for women during the same period (March-April). However this is only formal cases reported and women may not have been able to easily leave home to report or may not have felt comfortable reporting during lockdown.⁴ For example, Haguruka as well as CARE International found that while GBV reporting services have been functioning (Isange One Stop Centers, RIB), some women are either unable or unwilling to report cases, in particular those who are locked in with their abusers. Some reasons included: inability to physically access a place to report or inability to call (no phone, nowhere to talk); distrust that perpetrators would be removed from the home/jailed. Critically, women and girls with disabilities, as well as the elderly, are especially vulnerable to rights violations as they may be less able to protect themselves, access information and reach out for help and services available in the community. Elderly reached by NSINDAGIZA and HelpAge rapid assessment the highest risk during COVID has been neglect followed by isolation for older women and financial abuse for older men.⁵ This is compounded by the context around COVID19 which has affected the capacity of CSOs to continue providing response and access to justice services to women victims of GBV.

Further findings from Oxfam reveal that the lockdown has exacerbated vulnerabilities for GBV victims, in particular teen mothers. **92.7%** of GBV victims interviewed revealed that their livelihood (primarily informal sector), access to food and financial resilience were greatly affected by COVID-19. Teen mothers reached by both Kvinna till Kvinna and Oxfam, reported to have dropped out of vocational training, and lost their small businesses. **70%** of teen mothers interviewed by Oxfam currently lack any support for themselves and their children putting them at further risk of repeat GBV. As Rwanda still combats COVID19, restrictive measures remain in place, livelihoods are affected and there continues to be a risk of increased GBV. Furthermore, findings from CARE International, respondents (majority being women) showed that they are

³ As a continued support mechanism, HAGURUKA provided right-holders with phone numbers where they could reach their legal officers assistance. As of 11th May 2020, HAGURUKA also established a toll-free line (4311) to enable our right-holders to call in for legal assistance at a zero cost.

⁴ Oxfam Assessment, May 2020; assessment on the impact of COVID19 on GBV amongst SRHR project participants in 6 districts.

⁵ Covid19 Rapid needs assessment of older people, Rwanda, HelpAge International August 2020.

unable to earn income, particularly those currently engaged in casual/part time jobs. Responses suggest that men are marginally more likely to be able to work from home and earn an income than women. Our assessments show physical and economic violence to be the most likely forms of GBV during this time. This confirms that the gender inequality, economic insecurity and poverty-related stress are key elements in the relationship between GBV and the COVID-19 pandemic.

We draw attention to the need for Government and development partners to invest more towards gendered response to the COVID 19 crisis ensuring an inclusive economic stimulus package that recognises the linkage between economic assistance, social protection and GBV. GBV prevention strategies should be integrated into all national response strategies, not just economic recovery.

RECOMMENDATIONS

All actors:

- In order to combat GBV we encourage a holistic approach in the COVID-19 response to include a broad range of interventions such as: Sexual Reproductive Health Rights (SRHR), WASH (Hygienic materials), family conflict management, as well as education on GBV and unpaid care work (UCW) during the lockdown and post recovery period.
- Actions taken to prevent and respond to GBV should recognise the intersection between gender and disability in ensuring accessible services including the skills and attitudes of service providers. Awareness should tackle the vulnerability of persons with disabilities to violence specifically girls and women during critical moments like lock down.
- Extended family and surrounding community members targeted as accountable actors to support women and girls with disabilities who are victims of violence to access services as some of them depend on their perpetrators, yet their disabilities do not allow them to seek services independently.

MIGEPROF & GMO:

- We commend the actions taken by MIGEPROF and GMO to date and we advocate to further strengthen prevention and response measures of GBV including public awareness, access to information and adequate (and alternative) local response mechanisms. In partnership with civil society, we recommend stepping up these awareness campaigns in different forms, including targeted messaging for men and boys.
- GMO, as the gender machinery in charge of gender audit, to conduct regular GBV assessments and advocate for increased funding levels for GBV.
- GMO to analyse and ensure that there are more gendered, rights-based and localized responses for COVID19, and in general, that put women and girls at the center.

MINJUST

- To take measures during pandemic crises to ensure that the legal system continues to function and to follow up by providing robust support to women and girls victims of violence.

- To ensure RIB, Police and MINALOC are accountable and support GBV victims to obtain justice in a timely manner and that community reintegration after obtaining justice is supported as a part of the process.
- To develop and put in place contingency plans for disruption of justice services for GBV in crises. This includes introducing virtual services.

Districts

- Should ensure that they allocate a budget into their plans and performance contracts towards addressing GBV related issues raised due to COVID-19 and GMO can help to monitor this.

Development Partners & Civil Society:

- In addition to Isange One Stop Centres and RIB's efforts, civil society organizations should be further supported to offer alternative options for response and protection from GBV. In particular, designating safe spaces at community level for women where they can seek shelter, assistance and report abuse without alerting perpetrators.
- To provide legal aid throughout times of crisis, including early representation, legal advice and court representation for women victims of GBV.
- To support women and CSOs to continue providing virtual support for women victim of violence and advocating for women's rights.

WOMENS'S ACCESS TO FINANCE

COVID19 and associated lockdown measures have had a severe economic impact globally putting immense strain on communities, families and individuals who rely on daily wage work. Women, who make up the majority of the part-time, insecure and informal economy have been disproportionately impacted. Compounding this is the global burden of unpaid care work borne by women which has increased during lockdown, especially with children at home. In Rwanda, these global trends are reflected. Value chains and trade have been disrupted, loan repayment has become a burden for women who own small businesses, and little savings mainly poor and rural women had, they are reporting to have spent during lockdown for survival. The Economic Recovery Plan for Rwanda will make positive contributions towards restarting the economy.

However, the concern is that without a deeper gender analysis and clear policy responses that speak to rural, poor otherwise, vulnerable women and girls will be left behind. In a June 2020 rapid assessment administered by Trócaire on the impact of Covid-19 in agriculture across 6 districts in Rwanda covering 400 respondents, 34% women noted that they had used their household savings to respond to food insecurity during the period of lock down while 24% respondents resorted to taking a loan to cover household funding shortfalls. This did not compare favorably with only 10% of respondents that had received food aid and about 8% of respondents that had received cash transfers during the same period. The lack of food was considered as the biggest challenge in the community and It was recommended that any provision of agricultural inputs be complemented by the provision of a food protection ration,

to mitigate the risk of negative coping strategies. Further, as noted by Réseau des Femmes, UNABU and Rwanda Women's Network, the push for digital solutions has not sufficiently bridged the gender/ICT divide and risks not reaching women without phones, bank accounts or ICT literacy or considering disability inclusion more explicitly.⁶

RECOMMENDATIONS

Government

- MIGEPROF can support civil society, especially women-lead civil society organizations and individuals, to be persistently provided meaningful space to dialogue with the Government and Development Partners in policy reviews, implementation of the economic recovery plan and rebuilding of the economy at national, district and local levels.
- MIGEPROF: Initiatives and advocacy to increase access to finance should consider how women and girls with disabilities will be included, in particular in the use of digital platforms and the availability of information and support to women small-business owners. International and national NGOs must have a role in monitoring and providing feedback to relevant ministries and to the taskforce in charge of economic recovery. RGB/MINALOC to advocate for NINGO and National Civil Society Networks to be formally involved as partners in the process of prevention, preparedness response and recovery related to the COVID-19.
- With the support of civil society, MIGEPROF should continue to run campaigns on sharing of unpaid care work in homes, including tackling norms and attitudes as well as use of tangible equipment that reduces unpaid care work. This should be reflected in national and district planning and budgeting.

Development Partners

- Enable strengthened partnerships and funding streams between development partners, INGOs and CSOs to women's grassroots organizations to promote awareness of economic recovery options available and strengthen women's economic empowerment (WEE) in this critical time.
- Increased donor support for women's capacity building to revise their business plans in response to COVID19 situation and access seed funding and capital to women to restart and reinvigorate collectives and businesses, especially in the informal economy. In addition, women should be provided with education on saving for emergency preparedness - both money and produce. Additional resources should be channeled to provide women with technical and financial capacity for accessing value chains and off farm activities.

Banks and micro-credit institutions

- ISACCO, Bank of Kigali, COOPEDU, and other finance institutions, should reduce or suspend interest, increase repayment 'holidays' and offer additional credit to ensure these services are accessible and reasonable for women small-business owners. National Bank of Rwanda should create new products to suit vulnerable women and girls after COVID19.

⁶ Gender and Disability Analysis of the Economic Recovery Plan, Réseau des Femmes, Rwanda Women's Network and Unabu, May 2020

'RETURN TO EDUCATION' FOR GIRLS: THE CRISIS OF SEXUAL AND REPRODUCTIVE HEALTH RIGHTS AND GBV

As a result of the decision of closing schools to prevent the spread of Covid-19, currently in Rwanda more than 3.6 million learners are requested to stay at home. The majority of girls affected are adolescents, including refugees with and girls with disabilities. We believe that the closure of schools and other educational settings in response to the COVID-19 pandemic- although necessary- has a gendered impact both in the short and medium-run with education outcomes and in the long term as girls drop out due to early pregnancy and/or early and forced marriage.

The Government has encouraged education continuity at home through communication channels (radio, television and internet), where students can access REB educational content daily. Yet this disproportionately benefits children in urban areas who can access these assets to learn, while children, especially girls, in poorer and more rural homes risk falling behind. However, girls' increased burden of unpaid care and domestic work as well as their limited access and control on the use of media devices makes consistent studying at home particularly challenging. Girls with disabilities, especially those with hearing or visual impairment and learning difficulties, face additional challenges in maintaining their learning without the usual support they receive at school. Their parents may be less well-equipped to support learning at home.

Evidence from past pandemics shows that adolescent girls are at high risk of dropping out and not returning to school even after the crisis is over. Economic downturns, job losses and school closures are impacting the sexual and reproductive health rights of adolescent girls and exacerbating the gender based violence they face. Our organizations are observing an increase in unprotected transactional sex among peers or cross-generational sex, as well sexual violence, exploitation, trafficking, child labour and harmful practices. These are resulting in negative consequences such as: psychological trauma, early pregnancies, STIs, social stigmatization. Many of our organizations are getting reports in particular of early and forced child marriage as a result of the current COVID19 situation.

A significant challenge posed by school closure and economic down turn is the impact on girls' menstrual hygiene management. In Rwanda, most girls especially from rural areas often have access to menstrual hygiene materials from school and accessing essential SRH services from girl's rooms. Without these spaces and free access girls are suffering discrimination and harassment while on their periods and don't have safe spaces to talk about their sexual and reproductive health and choices. Findings from the assessment conducted by Save Generations Organization on the impact of COVID 19 to right holders, revealed that the COVID 19 crisis has affected families' ability to provide menstrual kits in lieu of those provided at schools leading to further period poverty. Although the tax on sanitary pads was removed in 2019, SGO found there have been claims of high prices of menstrual hygiene materials in rural areas especially. Prices of menstrual hygiene items require subsidization or alternative means for girls to access these materials freely while schools are closed.

RECOMMENDATIONS

Government and Civil Society:

- **MIGEPROF** and civil society should continue to join efforts in ensuring educational continuity by reaching out to girls with content that addresses different adolescent sexual and reproductive health and rights (ASRH) and gender issues, linking the messaging with relevant support services. This includes sensitization through radio and TV on teenage pregnancy, STIs, SGBV prevention including child defilement and child rights violations as well as engaging men and boys in domestic chores.
- **MINEDUC** and civil society should sensitise families and communities about the importance of girls' remote learning, increased risk of dropping out of school and the importance of addressing barriers to returning to school.
- At District level, efforts should be made to ensure girls with disabilities are specifically targeted in interventions and content reaches girls with disabilities particularly those with visual, hearing and learning difficulties.
- Increase the number of youth friendly corners to improve access to youth friendly services including menstrual hygiene materials.

Government

- **MIGEPROF:** In order to support girls' education continuity as well as mitigate the risk of girls' dropping out of school due to early pregnancies and marriage, MIGEPROF can ensure education recovery plans and related interventions to involve girls, including girls with disabilities, in the whole response cycle, and should explicitly consider the unequal access to media and digital, as well as girls' access to adolescent SRHR (ASRHR) information and services and support girls and young women's economic empowerment.
- **NWC & MINALOC:** NWC and local government should reinforce their role at grassroots levels to sensitize parents and identify the children especially girls with the limited access so that they are facilitated in going back to school.
- **MINICOM and PSF:** to work together to reduce the price to ensure these menstrual hygiene materials are accessible and affordable to all girls in Rwanda

Development Partners

- CSOs and INGOs should be further supported to prevent girls' exposure to violence and sustaining girls' well-being by supporting households to meet basic needs including food and non food items such as menstrual hygiene materials, and soap. Some have also contributed in building school infrastructure for students to return to school in an improved environment, in order to prevent school congestion and allow for social distancing.
- CSOs, jointly advocate for girls' right to access menstrual hygiene materials at lower prices, or freely, and remove barriers that may hinder girls' sexual and reproductive health rights in this, and other, crises.

WOMENS'S VOICE AND PARTICIPATION IN RELIEF AND RECOVERY

Rwanda's National Action Plan for Women, Peace and Security (2018-2022) seeks to achieve increased accountability and transparency for gender considerations in humanitarian assistance. Specifically gender integrated programs for inclusion and participation of women in humanitarian, early recovery, relief and peace building programs (Pillar IV, Output 2).⁷ Economic recovery and social inclusion plans and budgeting must not only address the needs of diverse women and girls in Rwanda but provide mechanisms, spaces and means for them to feedback and influence the recovery process at all levels. As INGOs we seek to amplify the voices and efforts of women, girls and women-lead CSOs whom we work with in Rwanda. In this regard, we call attention to the important work of the Rwanda Women's Network and SDG 5 Forum which recently convened a meeting on CSO impact towards COVID19. We also call attention to the forums being led by Pro-Femme Twese Hamwe with respect to the gendered impact and recovery efforts for COVID19.

RECOMMENDATIONS

National level:

- We strongly advocate for National Civil Society and NINGO to be represented on the Steering Committee for national recovery and for MIGEPROF to take the lead in advocating for gender analyses and responses to be centered in all recovery plans.
- GMO, with support of Civil Society, to monitor commitments to equal representation of men and women in decision making process at all levels, with space for women and girls to meaningfully participate to ensure responses are sensitive to the different needs especially of women and girls. This should include due attention to the involvement of women and girls with disabilities but also taking into action their needs and priorities when decisions are made as well providing feedback on due time.

At District and level:

- Gender-focused local organizations and NWC should have a voice in planning and implementation of recovery efforts by being involved in consultations at all stages.
- Women and girls, especially those most vulnerable, be included in community based coordination mechanisms and structures for prevention, preparedness and response related to the COVID-19 pandemic so that their specific needs are recognized, understood and addressed.

⁷ Rwanda National Action Plan (2018-2022) for the implementation of UNSC Resolution 1325 and subsequent resolutions, Ministry of Gender and Family Promotion, page 9. Available at: <http://peacewomen.org/sites/default/files/NAPRwanda2018.pdf>

SIGNED BY:

SDG 5 FORUM AND NATIONAL CIVIL SOCIETY ORGANIZATIONS

Reseau des Femmes Oeuvrant pour le Développement Rural, Rwandan Organization of Women with Disabilities (UNABU), HAGURUKA, Duhozanye Organization, Save Generations Organization, Rwanda Women's Network, SEVOTA Organization , Organization of Women in Sports (AKWOS) , ActionAid Rwanda, Legal Aid Forum, AJPRODHO – JIJUKIRWA, Rwanda Men's Resource Center (RWAMREC), NSINDAGIZA, Rwanda Development Organization, Transparency International Rwanda, Institute of Research and Dialogue for Peace, Conseil de Concertation des Organizations d'Appui aux Initiatives de Base

NINGO WOMEN'S EMPOWERMENT AND GENDER EQUALITY TECHNICAL WORKING GROUP:

Kvinna Till Kvinna, Oxfam UK, CARE, Wellspring Foundation, Girl Effect, Plan International , Women for Women International, Trócaire, Catholic Relief Services, Norwegian People's Aid, VI Agroforestry, Save the Children, Spark Microgrants , AVSI Foundation, Indego Africa , VSO, Help a Child, World Vision , Health Poverty Action, Right to Play