

COVID-19: An Urgent Need of a Humanistic Gender Equality Way of Analysis

What are the right words, the relevant ones, the words able to express the intensity of our sorrow, of our anxiety, of our anger and of our hopes in this very particular moment?

Millions of people are dying and succumbing to war or the consequences of war. Millions of refugees and internally displaced people living in inhuman conditions. Millions of people deprived of access to water. Millions are dying from hunger. Millions becoming homeless. Then, what about the infinite number of political prisoners, of slaves, of people dying on their way to escape violence and misery, what about people under occupation?

The Coronavirus pandemic that is now amplifying all these sufferings, misfortunes, and all existing massive, structural and cruel inequalities, makes the Universal Declaration of Human Rights statement "All human beings are born free and equal in dignity and rights" sound like a monstrous fiction.

The present crisis is shedding a sharp and lucid light on the criminal management of our planet resources and on the inhumane policies based on exploitation, oppression, competition, militarization, neocolonialism, and their endless cohort of tragic consequences: bloody conflicts in Syria, Libya and Yemen, on-going occupation of Palestine, loss of life, illness, lack of water, famine, refugees, internally displaced people, unspeakable physical and mental sufferings, and destroyed lives.

Whatever our leaders say, we are not in a state of war! The virus is confronted not with weapons, but with doctors, masks, respirators, medical equipment and hospital beds, with health systems that have been steadily dismantled globally during the last decades. The pandemic puts under our eyes a sort of radiography of globalization highlighting the misery of the public health services. These, like all public services, faced privatizations, increased precariousness in employment, austerity measures on behalf of competitiveness and profit, as well as the lack of basic medical means, which are now mainly produced and imported from countries where the cost of the labor is lower.

Women are always at the forefront in dealing with all the consequences. They are the first to suffer from the economic choices based on the sacred law of profit. There's no need to say that, across the world, women's oppression is the silence face of the pandemic. According to the World Health Organization, about 70% of workers who are massively exposed to the virus in the health and social sector, trade professions, cleaning services, and personal assistance services, are women. Besides, the loss of income, the closure of schools, put an added burden on women, who traditionally suffer from unequal familial and domestic responsibilities. Moreover, the closure of appeal and rescue services creates additional difficulties to secure some cases when lives are at stake.

As tension rises, the rates and severity of domestic violence against women, including sexual and reproductive violence, are growing. In addition to gender stereotyping and a hostile discourse against gender equality, we are also witnessing a new wave of sexist cyber-criminality on social media. Stress, unemployment and financial difficulties are the permanent triggers of domestic violence. Social distancing and isolation are amplifying it: for example, there has been a 30% increase in domestic violence in France since the beginning of home confinement. At the same time, the shutting down of routes to safety and support are making escape from an abusive partner more difficult. What's more, the access to protection services is declining due to lockdowns and the lack of public means. Women and girls victims of violence and persecution are not able to leave for asylum countries because of the closure of borders and travel restrictions. Moreover, at a time when all medical and human resources are focused on the outbreak, other health concerns that are not considered as a priority are being canceled. This can have a negative impact on mental health and reproductive health and rights.

Policymakers are adopting gender-blind analyses of the pandemic, and the underrepresentation of women among decision-makers doesn't help to underline women's needs. The response of our governments to COVID 19 should be in accordance with human rights standards and the principles of equality and non-discrimination of elderly people, people with disabilities or health problems, people in rural areas, the homeless, refugees, migrants, indigenous peoples, stateless people, human rights defenders, and people living in conflict and war zones, while taking into account that the female part of them all, endures a disproportionate impact of the crisis due to the already existing structural inequalities.

EuroMed Feminist Initiative members are at the front line in their countries in responding to the circumstances related to COVID 19 as on help-line counselors, community leaders and activists who raise the awareness for protection while remaining involved for a world where the basic needs of food, health, housing, and education are guaranteed for all. We salute all brave and heroic health workers who are putting their lives at risk.

EFI asks the General Secretary of the United Nations to hold all States accountable to International Human Rights Law and International Humanitarian Law in order to translate his Appeal for Global Ceasefire to reality and to create an enabling condition for combating COVID 19.

In these times when exceptional security measures are taken across the world, we are determined not to let our dearly acquired freedoms be taken away.