



SYNTHESIS REVIEW SERIES: SPECIAL EDITION #1

LEARNING FROM PRACTICE:

THE IMPACT OF THE COVID-19 PANDEMIC ON PREVENTION OF VIOLENCE AGAINST WOMEN AND GIRLS

Lessons from civil society organizations funded by the
UN Trust Fund to End Violence against Women on prevention



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Cover photo: Cover photo: Distribution of Medicine to women survivors of gender-based violence in Gala Tapa of Kunduz. Credit: Marya, Psychologist/Women for Afghan Women (Afghanistan)



About the United Nations Trust Fund to End Violence against Women

The United Nations Trust Fund to End Violence against Women (UN Trust Fund) is the only global grant-making mechanism dedicated to eradicating all forms of violence against women and girls. Managed by UN Women on behalf of the United Nations system since its establishment in 1996 by United Nations General Assembly Resolution 50/166, the UN Trust Fund has awarded almost \$198 million to 572 initiatives in 140 countries and territories. In 2021, the UN Trust Fund managed a grants portfolio of 157 projects aimed at preventing and addressing violence against women and girls in 68 countries and territories across five regions, with grants totalling \$74.7 million. Grant recipients are primarily civil society organizations (CSOs). Since 2018 (cycle 20), the UN Trust Fund has been funding only CSO projects. In 2021, the majority (59 per cent) of these CSOs were women's rights organizations.

About the learning from practice series on prevention

In this series the UN Trust Fund has prioritized engagement with what has – to date – been a fairly neglected area within research on prevention of violence against women and girls, practice-based insights from civil society organizations. In 2020 it commissioned a synthesis of this knowledge emerging from 89 UN Trust Fund civil society organization grants, implemented or closed during the period covered by its 2015–2020 Strategic Plan. Findings were captured from two types of source documents from grantees: final progress reports (written by grantees) and final evaluation reports (written by external evaluators commissioned by grantees). The first step in the series was a synthesis review and identification of common approaches or thematic areas in prevention across the 89 projects, to determine the focus of knowledge to be extracted (Le Roux and Palm, 2020).

Ten key thematic areas or “Pathways towards Prevention” (Box 1) were identified through an inductive process

including a desk review of reports and a series of consultations with grantees/practitioners in English, French and Spanish. The UN Trust Fund aims to analyse and co-create knowledge under each pathway. Each pathway has been analysed and the corresponding synthesis co-created by a researcher/s and ten grantees per pathway whose work generated significant practice-based insights on the particular theme and who could offer contextual and embedded best practices, challenges and useful tools on the topic that emerged from iterative learning from practice. In addition to the ten themes, the impact of the COVID-19 pandemic on prevention programming arose inductively as a cross cutting issue across all ten, worthy of a dedicated special edition.

The intended audience for this synthesis review is threefold: (i) practitioners, (ii) donors and grant makers and (iii) researchers, all working in the area of VAWG prevention. The “learning from practice” series is intended to highlight practice-based insights from CSOs as highly valuable and important to planning, designing and funding interventions and research in VAWG prevention. Each longer synthesis review will be accompanied by a shorter summary, available on the UN Trust Fund website.

BOX 1: PATHWAYS TO PREVENTION IDENTIFIED

1. Community mobilization
2. Engaging faith-based and traditional actors
3. Exploring intersectional approaches
4. Mobilizing women
5. Training for behaviour change
6. Adolescent-focused approaches
7. Resistance and backlash
8. Adaptive programming
9. Survivor-centred, Multisectoral services as part of VAWG prevention
10. Working together for law and policy implementation and reform

Special Edition #1 The Impact of the COVID-19 pandemic on the prevention of violence against women and girls

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Horn of Africa in South Sudan, Initiatives pour la Protection des Droits des Femmes in Morocco, Equality for Growth in Tanzania, Free Yezidi Foundation in Iraq, The Story Kitchen in Nepal, MADRE and Wangki Tangni in Nicaragua, Beyond Borders in Haiti, Trocaire in Kenya, Al Shehab Institution for Comprehensive Development in Egypt, Leonard Cheshire Disability Zimbabwe, Raising Voices in Uganda, Women's Justice Initiative in Guatemala. This project would not have been possible without their practice-based insights.

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EWEI's "Our Safe Space" staff Uche Brown is checking temperature of participant, Linda Zakari, in line with COVID-19 preventive measures. Credit: Abraham Samuel Ben/EWEI (Nigeria)

ABBREVIATIONS

AÇEV	Mother Child Education Foundation
AIDS	Acquired immunodeficiency syndrome
COVID-19	Coronavirus disease 2019
CF	Community facilitator
CSO	Civil society organization
FGD	Focus group discussion
HIV	Human immunodeficiency virus
IDP	Internally displaced person
MDRI-S	Mental Disability Rights Initiative of Serbia
PHR	Physicians for Human Rights
RRRT	Pacific Regional Rights Resource Team
UN Trust Fund	United Nations Trust Fund to End Violence against Women
VAWG	Violence against women and girls
WRO	Women's rights organization



1. INTRODUCTION

The COVID-19 pandemic and in some contexts the response to it are making women and girls across the world increasingly vulnerable to various forms of violence, not only in the household but also at work and in public spaces (Majumdar and Wood, 2020; Peterman and O'Donnell, 2020; UN Women, 2020). The pandemic has exacerbated key risk factors for violence against women and girls (VAWG), and reports of multiple forms of VAWG, especially physical, psychological, sexual and economic forms of domestic violence, have increased. The COVID-19 response has also escalated VAWG risks, creating a “perfect storm” of social isolation, online abuse, school closures, and heightened economic and psychological stress (Spiranovic et al., 2021). The pandemic has also increased intersecting risk factors for VAWG perpetration by men (e.g. unemployment and poor mental health) (Spiranovic et al., 2021).

The pandemic has also threatened access to services for survivors of violence. Some of those requiring services now more than ever have faced new barriers, creating a culture of impunity. Prejudice against certain groups has deepened, and privileged women’s needs have predominated (Imkaan, 2020). In addition, while the pandemic has offered opportunities for innovation in moving services online, this shift to digital services can reinforce vulnerabilities due to existing digital gaps. These intersecting pandemics of VAWG and COVID-19 place a responsibility on everyone to work towards a reimagined post-COVID-19 future in relation to VAWG prevention: *“The two pandemics compel us to reimagine a different system ... The analysis of [their] intersection of the two pandemics makes it clear that it cannot be business as usual in the post-COVID-19 period. Fundamental structural change is needed”* (Imkaan, 2020, p. 4).

However, despite the surge in research and practice at this intersection, there remains a lack of context-

specific published research and documentation on how the COVID-19 pandemic has affected VAWG prevention work specifically and how such work can best be adapted. In response to the pandemic, governments implemented emergency measures, such as social distancing and lockdown orders, that often limit opportunities for activities that rely on in-person engagement (Raising Voices, 2020a). In many settings, activities were suspended or substantially adapted, including through smaller group sizes and shifting content to virtual platforms. However, moving interventions online has been difficult for organizations that thrive on face-to-face interaction and community trust, and for those that lack access to digital tools and spaces or operate in remote rural communities with no Internet access or electricity. Community members, activists and leaders have also faced additional responsibilities and stress, limiting their time and emotional space to engage (Raising Voices, 2020a).

This synthesis review draws on the experiences and practice-based knowledge of civil society organizations (CSOs), especially women’s rights organizations (WROs) supported by the United Nations Trust Fund to End Violence against Women (UN Trust Fund), to document the impact on and adaptations to prevention programmes during the COVID-19 pandemic across the world. It draws specifically on the lessons learned. The majority of the projects included in this synthesis review concluded their UN Trust Fund-funded programming before the COVID-19 outbreak, but some continued their programming with other funding. The focus group discussions (FGDs) conducted with practitioners explored their experiences of working on VAWG prevention during the pandemic, and any insights from their earlier programming that they felt could be valuable in the COVID-19 context.

2. KEY FINDINGS

Four key themes emerged from practitioner learnings and were used to synthesise the data and structure this brief: a) the impact on the COVID-19 pandemic on working with women and girls for VAWG prevention, b) the impact on mobilizing communities for VAWG prevention during the COVID-19 pandemic, c) mobilizing legal systems

and essential services for VAWG prevention during the COVID-19 pandemic and d) building organizational resilience and adapting prevention programming during the COVID-19 pandemic. These findings are discussed in the below four subsections alongside a short literature overview to accompany each section.



Mrs Ros Nhor, a woman with a disability, receives emergency project materials/inputs to run her small business. Credit: Sambath Rachna/ ADD International (Cambodia)

2.1. Mobilizing women and girls for VAWG prevention during the COVID-19 pandemic

LITERATURE REVIEW

Evans et al. (2020) noted that the COVID-19 pandemic had a disproportionate impact on the most vulnerable women and girls. Literature on VAWG during the pandemic, especially by feminist scholars concerned with VAWG prevention, draws attention to intersectional approaches (Heard, 2020; Imkaan, 2020; Lokot and Avakyan, 2020; UN Women, 2020b). Intersectionality offers an important perspective on the COVID-19 pandemic overall (Heard, 2020; Lokot and Avakyan, 2020): COVID-19 should be understood not as a “great equalizer” but as compounding pre-existing vulnerabilities (Hankivsky and Kapilashrami, 2020; Lokot and Avakyan, 2020; Spiranovic et al., 2021; Wenham et al., 2020). It makes visible “a broader landscape of inequalities” (Wenham et al., 2020) and highlights underlying vulnerabilities. Moreover, society’s responses to the COVID-19 pandemic further invisibilized some forms of VAWG, which often flourishes in isolation (Imkaan, 2020; Lokot and Avakyan, 2020; Majumdar and Wood, 2020). A range of intersections (e.g. race, ethnicity, location, disability and class) shaped who was marginalized by COVID-19 (Wenham et al., 2020), for example, women who rely on informal carers (UN Women, 2020b) and homeless migrant women (Fernandez, 2021) were particularly vulnerable. COVID-19 sometimes took attention and resources away from other important health issues for women (Lokot and Avakyan, 2020). Pre-existing and new issues (e.g. HIV and unemployment) intersected to increase women’s risk of contracting COVID-19 and the impact of COVID-19 responses (Spiranovic et al., 2021). An area that needs more work is the larger power structures in COVID-19 responses in relation to VAWG prevention (Imkaan, 2020; Lokot and Avakyan, 2020). The COVID-19 pandemic has highlighted a need for coalition-building to ask questions about power and explore what is prioritized, who benefits and who is left

behind (Hankivsky and Kapilashrami, 2020). It has also led practitioners to reimagine how prevention programming should engage with women and girls, especially those most at risk of violence.

All practitioners included in this series noted that COVID-19 made situations for the already vulnerable groups they engaged with worse, by deepening marginalization and invisibility, adding new risks and creating additional barriers to accessing services.

For example, as a result of government responses to the COVID-19 pandemic, Mental Disability Rights Initiative of Serbia (MDRI-S), witnessed extreme forms of increased isolation among women and girls, especially women in institutions. Existing patterns of violence deepened because of their hyper-invisibility, including abuse by institutional staff and the re-institutionalization of women from assisted-community-living models to “protect” them from COVID-19. Meanwhile, MDRI-S’s ability to provide services and support and to act as a watchdog was severely hampered. This led to an almost total loss of support for these women, who were highly vulnerable to violence. MDRI-S’s training model cannot simply be adapted for online delivery, owing to a lack of privacy and technology in institutions.

The COVID-19 pandemic has also highlighted existing barriers for many at-risk women and girls.

Several organizations identify COVID-19 and responses to it as new vulnerabilities that intersect with, and exacerbate, vulnerabilities they were already addressing, such as economic vulnerability among self-identified sex workers in Jamaica and Thailand, lack of access to justice for women with disabilities in Zimbabwe and limited access to health services for those unable to pay for them in Guatemala:

[COVID-19 regulations] are affecting them strongly, since the restrictions [have] plunged them into greater poverty. Their [lack of] access to services has increased because services such as health [clinics] have closed their outpatient consultations; there is only prioritizing care for COVID patients to counteract the pandemic, as if there were no chronic diseases, or reproductive health [needs]. If people cannot pay for private services that have become excessively expensive, there is no

public care other than emergencies: surgical, trauma and obstetrics, for the moment (FGD invitee, written response, 1 February 2021).

The COVID-19 pandemic has made women and girls even more vulnerable not only to violence but also to poverty and food insecurity. The compounded impact has led to re-traumatization for at-risk women and girls. For example, the compounded effects of school closures and rising economic insecurity meant that some adolescent girls could no longer be reached in schools by grantees at a time when several forms of VAG were increasing. In contexts where people that had already gone through crises – for example war or natural disaster – the pandemic led to a significant rise in re-traumatization:

For us, the women survivors of Nepal’s armed conflict are facing a triple trauma during the pandemic of COVID-19: ... human rights violations, escalating domestic violence during COVID-19, and added trauma and anxiety due to COVID-19 and due to the loss of livelihood (The Story Kitchen, FGD, May 2021).

Similarly, for another organization – the Free Yezidi Foundation (FYF) in Iraq – the pandemic has highlighted the plight of undocumented internally displaced persons (IDPs) overall, and undocumented survivors and at-risk women especially. Living outside the Khanke camp, which is full, these IDPs are not formally acknowledged by the government, so they do not have the same rights as IDPs in the camp. COVID-19 has made “unofficial” IDPs’ situation even more precarious, as they have not received the food assistance and hygiene kits that IDPs in the camp have received during COVID-19. Therefore, FYF focused on providing for IDPs outside the camp. FYF’s experience highlights the importance of responding to the needs of those whose vulnerabilities are compounded by multiple factors.

Finally, school closures were identified as a particular issue for those working with girls. Several partners identified closures as a risk factor for school dropouts in the longer-term and for violence against girls, with risks exacerbated by economic pressures on households, as noted by Pragma in India:

We saw a huge effect of COVID and lockdown on our target groups and we know that gender-based violence went up. That is from our interaction with the groups. We haven’t been able to pull up a detailed data collection because of the challenges, but we know from interactions that we have had, and child marriage cases have gone up and we did expect that because for many families, food was a challenge for them (FGD, 23 November 2021).

Gender bias played out in new ways in the digital realm during COVID-19, with boys being prioritized and those with intersecting vulnerabilities, such as girls with disabilities, often left even further behind:

Because the schools were closed ... and later on some [classes] started online where the girls couldn’t join ... we do fear that many of them won’t go back to school again. And some families they only had one phone through which the child could join, so the priority would go to the male child ... all those things we noticed (Pragma, FGD, 23 November 2021).

Given the link between food and economic insecurity and violence at household level, providing food and emergency materials was seen by practitioners as a VAWG prevention activity. In Liberia and Kenya, projects redirected funding to help beneficiaries who were unemployed or had lost income as a result of the pandemic. They mostly provided food but also distributed sanitation and hygiene materials, often through local networks – for example of youth leaders, or faith-based and traditional actors – that the projects had developed before the pandemic. In Honduras, Centro de Derechos de Mujeres reallocated some funds to cover participants’ basic needs, such as food and medicine. Strategic Initiative for Women in the Horn of Africa staff in South Sudan received an information pack on responding to the pandemic, and a COVID-19 safety policy was developed. The project provided participants and staff with personal protective equipment (PPE), handwashing facilities and sanitizer. Beyond Borders in Haiti distributed PPE kits through local government offices to make mobilization activities safer.

When the pandemic began, several projects already had a trusted group of front-line workers that they relied on to continue project activities – particularly women who had been mobilized and trained as leaders in their communities. When routine services and mobilization activities stopped because of strict lockdowns, several organizations turned to these women to understand women’s and girls’ needs and devise solutions quickly. They typically lived in the target community and were able to provide crucial information and to support women facing violence. Initiatives pour la Protection des Droits des Femmes, a Moroccan women’s association working to eliminate violence against women, mentioned that its cadre of mobilisers *woulina mounadilat* (“we have become activists”), enabled the project to continue:

We made use of the social networks of the group “woulina mounadilat”, which have neighbourhood cells. The women put posters in neighbourhood pharmacies with contact information and that way they could do outreach to break the isolation of potential victims (Initiatives pour la Protection des Droits des Femmes, written response).

Equality for Growth in Tanzania, another WRO, found an innovative way of continuing to engage its community of women, informal sector traders. It trained its front-line cadre of women community facilitators (CFs) online in the use of digital technologies. Using mobile phones and online tools, CFs reached out to their peers and collected stories from fellow female traders to understand any ongoing VAWG issues. They also arranged online meetings so that the women could discuss how to adapt their businesses during the pandemic.

Women already mobilized by projects could play an effective leadership role among their peers and in their communities, and they did their best to ensure that help and support were available, particularly for those experiencing violence. Because women CFs were communicating the needs of the broader community of project participants and responding to them, they felt a greater sense of ownership of projects. However, a considerable burden was inevitably placed on those on the front line, as they were relied on to reach community members when project staff were not able to. More attention must be paid to how they can be mentored and supported remotely to prevent burnout and vicarious trauma.

KEY TAKE-AWAYS

- COVID-19 made situations for vulnerable groups worse, by deepening marginalization and invisibility, adding new risks and creating additional barriers to accessing services for women and girls. It also highlighted barriers that already existed for many at-risk women and girls.
- School closures were identified in multiple regions as an issue for those working with girls.
- Given the link between food and economic insecurity and violence at household level, providing food and emergency materials was seen by practitioners as a VAWG prevention activity.
- Several projects activated an existing front line – such as a cadre of women who had been mobilized and trained to be leaders in their community – to continue prevention activities; they played an effective leadership role.

2.2. Mobilizing communities for VAWG prevention during the COVID-19 pandemic

LITERATURE REVIEW

In the context of the COVID-19 pandemic and increasing VAWG, some experts point out the underlying faith-based justification of social norms that can underpin violence in the home (Palm, 2020), as well as the potential that faith-based and traditional actors may have to respond to VAWG, as it may be considered acceptable for them to engage in “private” household matters (Gennrich, 2020). Some experts draw attention to how the pandemic is opening people’s eyes to the possibility of changing how things are “typically” done in society and households, arguing that faith-based and traditional actors can play a key role in this by addressing and transforming the social norms that drive VAWG (Le Roux, 2020; Palm, forthcoming). Faith-based and traditional actors have played a role in responding to other pandemics, such as HIV/AIDS and Ebola (Balibuno et al., 2020; Campbell, 2020); what role might they play in responding to COVID-19? There remains a lack of research and evidence on how VAWG prevention work with faith-based and traditional actors is being impacted by the COVID-19 pandemic.

Most practitioners pointed to the importance of VAWG prevention programming meeting the material needs not only of women and girls but also of community members around them during the pandemic. Almost all organizations mentioned that the communities they served were experiencing severe food shortages. Projects often pivoted to meet this need, using their skills to distribute food.

When lockdowns were declared, projects were forced to pause abruptly, as so many prevention activities involving community actors require people to gather in groups or staff to travel. However, engagement with community actors did not stop; on the contrary, work often became hyper-localized. Many practitioners radically adapted their community mobilization programmes because of COVID-19-related social distancing. One FGD participant noted that the Breakthrough Trust in India, a CSO that has been working to combat domestic violence for over two decades, adapted its campaigns to virtual spaces, shifted to smaller group sizes and supported local youth activism:

When the lockdown started a lot of things moved to the virtual space. We tried to do some events, storytelling workshops and things like that. But mobilizing per se reduced a lot. Some people ... tried to reach out to community members using WhatsApp calls, video conferencing methods, and [tried to find out] if there could be mobilization by community members themselves. The young people we had trained over the last few years, we saw them take leadership and bring their own version of community campaigns in a hyperlocal manner to address ... issues arising in their communities. It was easy for them to get together in their own villages, as we could not reach them. And they did their own mobilization there. Mostly sticking [to] posters or wall paintings, which did not require too much of a crowd but ensuring that the activism messaging gets out. After the lockdown was removed, we started gathering people but [with] safety protocols in place and ensuring social distancing (FGD, 15 February 2021).



Mrs Ton Sarom, a caregiver, is giving a thank you speech for the COVID-19 emergency support provided by the project. Credit: Sambath Rachna/ADD International (Cambodia)

The Mother Child Education Foundation (AÇEV) in Turkey, working with men and boys, reported on hyperlocal hubs and initiatives that emerged from the WhatsApp groups of the Father Support Programme cohorts. Fathers in the programme and who had graduated from the programme wanted to pass on what they had learned, and they formed local groups with other fathers and trainers. These groups evolved naturally and AÇEV offered support where it could (e.g. by providing training sessions):

These formations were kind of doing social media challenges and advocating for fathers to become more involved in the housework and [help] out with their spouses ... so basically, they are another voice for us on social media (AÇEV, interview, 22 February 2021).

Several organizations had to carefully revise their messaging and their means of continuing dialogue with communities. One FGD participant stated that SASA! had developed content on the intersections between violence and COVID-19 and had focused on benefits-based messaging:

We created SASA!-style posters or community conversations and info sheets that work at the intersection of COVID and violence. These focus on aspirational values and relationships – “How can you support your partner during a stressful time?” – rather than asking how power is being balanced in the household. We tried to steer away from more sensitive topics which could be more risky for women given the context of isolation and lockdown (FGD, 15 February 2021).

In Serbia, the Center for Girls conducted a social media campaign to raise awareness of the increase in VAWG during the pandemic. MADRE and Wangki Tangni in Nicaragua used MADRE's indigenous-women-led radio station to reach rural communities, sharing COVID-19 updates and public health messages, and raising awareness about VAWG and referral options. Practitioners emphasized the importance of efforts to help leaders and service providers to prevent and respond to VAWG:

We engaged front-line workers and village heads. They were struggling [with] how to provide support in COVID times to their communities. Getting them to have access to information and what protocols they can follow and in case of violence how they support survivors, was one thing we provided them [with], including during the lockdown period, through WhatsApp or conference calls (FGD, 15 February 2021).

Redirecting funding to the COVID-19 response contributed to programming outcomes, as supporting faith-based and traditional actors and their communities in such challenging times built deeper relationships and trust. This ensured that relationships with faith-based and traditional actors did not fade (and in some cases were even strengthened), which helped in the roll-out of VAWG prevention programming when it was resumed. One practitioner commented:

Due to COVID-19, our beneficiaries lost their jobs/sources of income ... We responded to emergency needs, for example food, sanitary pads for women and girls ... We implemented this through religious leaders, and [that] went a long way in strengthening and maintaining the relationship we had established with the church (FGD, 1 December 2020).

The pandemic has also highlighted the need for work with communities, especially faith-based and traditional actors, to be flexible and adaptable, to respond to immediate emergencies. In adapting its work with faith-based and traditional actors during the COVID-19 pandemic, Trócaire in Kenya engaged with church-owned radio stations to communicate various VAWG prevention messages that, in the original programme planning, would have been disseminated through in-person meetings. Now that COVID-19 restrictions are starting to be lifted in Kenya, in-person meetings are resuming. The pandemic has highlighted the ongoing need for programming that can be rapidly adapted in response to unexpected circumstances. Some projects were able to adapt so that some training, awareness-raising and mentoring could continue during

lockdowns, where faith-based and traditional actors had smartphones or access to online platforms. Trócaire used Zoom, Skype and WhatsApp to stay in contact with these actors, checking in with them and mentoring them. Some faith-based and traditional actors used WhatsApp to continue to raise awareness of VAWG.

Some FGD participants related the challenges of moving community mobilization activities online, such as the lack of two-way dialogue, which is fundamental to processes of change (for more on online adaptations, see Section 2.4):

Community radio, etc. was very helpful during COVID times with some outreach messages. It would be more broadcast rather than engagement, which was a challenge we found difficult to crack. When you say mobilization there is meant to be a chance of dialogue, having communication with the other. Sadly, a lot of mobilization that happened last year was more broadcasting, giving out messages from one space (FGD, 15 February 2021).

KEY TAKE-AWAYS

- Most practitioners pointed to the importance of VAWG prevention programming meeting the needs not only of women and girls but also of their communities in the pandemic.
- Community mobilization programmes had to radically adapt – their media, messages and number of participants, among other things – and several became hyper-localized.
- Supporting communities during challenging times built deeper relationships and trust.



Food packets and ration distribution to the communities. Credit: Lok Samiti, Banaras/ SAHAYOG (India)

2.3. Mobilizing legal systems and essential services for VAWG prevention and response during the COVID-19 pandemic

LITERATURE REVIEW

The COVID-19 pandemic has created significant problems for women and girl survivors of violence. Ensuring their safety often requires a complex decision-making process involving help-seeking and support in informal and formal networks. However, COVID-19 mitigation measures, such as quarantine, travel restrictions and social distancing, compromised many survivors' strategies for staying safe (Roesch et al., 2020, p. 1; Wood et al., 2021, p. 2). Survivors' inability to access support, due to official travel restrictions and/or societal pressure to "stay put", was compounded by the temporary or permanent closure of some services (Bourgault et al., 2021; Huq et al., 2021; Wood et al., 2021). Some service providers temporarily or permanently halted service provision, owing to COVID-19 mitigation measures and fears, while others had reduced resources and capacities (Bourgault et al., 2021; Huq et al., 2021, p. 2). More informal community support systems were compromised. For example, community spaces and neighbours' homes were no longer available as escape routes owing to lockdowns and social distancing protocols (Majumdar and Wood, 2020, p. 9). Some service providers were able to provide alternatives in certain settings. For example, virtual counselling was provided by many, over the phone or through online platforms, although it carries the risk of survivors being overheard by others (even the perpetrator) and requires them to have access to a device (Huq et al., 2021; Ragavan et al., 2020). The reality is that COVID-19 has contributed to the fact that, globally, survivors are not receiving the support they need, including basic survival supplies, legal counsel and medical attention (Huq et al., 2021).

Moreover, while there has been some focus on responding to violence, including issues of accessing justice, more evidence is needed from practitioners on how COVID-19 has affected

VAWG prevention work and in particular CSOs' long-term multi-partner collaborations with formal government and judicial systems. COVID-19 responses put pressure on the health-care and police systems, vital players in VAWG prevention. Care needs to be taken to ensure that systemic VAWG prevention does not lose ground as a result of the pandemic. VAWG prevention needs to be built into COVID-19 national recovery plans, which will require sustained pressure from CSOs and WROs – and the collection of disaggregated data. New risk hotspots may emerge, such as migrants travelling home, women trapped at home and girls out of school in contexts of high rates of child marriage. The literature also emphasizes the need for a gender perspective on justice systems and their deficits, and the importance of keeping the repeal of discriminatory laws on track and on the agenda. The deeper question of how resilient our gender justice systems are to crises has to be addressed.

COVID-19 has created many additional challenges for grantees who offer survivor-centred services for VAWG prevention. The pandemic made the lives of survivors and at-risk women even harder. While there was still a great (and often increasing) need for services, many services were no longer available owing to public health measures. For example, FYF in Iraq, which provided psychosocial counselling pre-pandemic, found that VAWG was increasing in the Khanke camp, as everyone was forced to stay in their tents because of lockdowns, worsening already stressful living conditions and limiting survivors' opportunities to access services. Yet many non-governmental organizations closed (some permanently), abruptly ending services that survivors relied on. In Kenya and the Democratic Republic of the Congo, some survivors' referral points were converted into COVID-19 response centres, and some referral points closed owing to service providers' refusal to work without adequate PPE. Organizations such as Physicians for Human Rights (PHR) faced the additional difficulty that they worked with first responders in the Democratic Republic of the Congo and Kenya. During COVID-19, these first responders were overwhelmed. PHR had to adjust its planning, as engagement in the forensic evidence chain was not possible or appropriate in the light of the immediate challenges of COVID-19.

Practitioners noted that COVID-19 had also made their work on legal and policy reform and implementation far harder, as these systems were overwhelmed with new requirements. FGDs with practitioners highlighted that, during the COVID-19 crisis, government priorities were often elsewhere, with many personnel unavailable or overwhelmed with new issues. Legal and court systems were often dealing with “urgent cases” only – which in several countries did not include VAWG cases. The lack of capacity at this level risked reversing the gains made in multisectoral collaboration for VAWG prevention, especially with key groups such as the police and health workers:

[B]ecause the entire managing and checking of COVID-19 called upon the health workers and police as the frontline workers, so they were not being able to cater to any other needs of the community, so they were completely engaged in that [COVID-19] and they didn't have capacity to deal with anything more (FGD, 23 November 2021).

Several governments declared states of emergency in response to COVID-19. This often led to an upheaval in the usual protocols for disasters such as conflict and military coups. For example, in Solomon Islands, the Pacific Regional Rights Resource Team (RRRT) saw the declaration of a state of emergency throw an already fragile post-conflict government system into chaos. Government workers not seen as “essential” – including many from the two ministries that they were partnering with, the Ministry of Justice and the Ministry of Women, Youth and Family Affairs – were required to take compulsory leave. At one point, there were only three people left in the entire women’s division, with limited operational funds. As a result, RRRT encountered delays in its programmes and required extensions to cope, and there were implications for the final evaluation, as qualitative data could not be gathered face to face as planned. In addition, the rapid migration of people from urban areas where they worked to their homes in rural areas put extra pressure on the projects; rural justice systems were at risk of becoming overwhelmed by the needs of women and girls, and the existing challenge of the costs of face-to-face interventions in remote rural areas was highlighted:

In March–April 2020, the government encouraged people to leave the urban capital and return to their home provinces. This impacted the work of Authorized Justices who had to focus on changes in their communities such as increased stresses on food sources and increased crime, including domestic violence ... there is an increasing need for Authorized Justices to have the confidence to issue IPOs [interim protection orders] through applications made over the phone. Discussions continued on this with the Magistrates Court, which keeps a register of IPOs (Final Evaluation RRRT, pg 34).

These states of emergency were noted by some organizations as repressive, owing to increased government powers. For example, focus group participants across two continents pointed to the risk of governments cracking down on CSOs and misusing their powers to silence democratic protests and dissent by CSOs on issues such as women’s rights, police abuse and judicial corruption.

CSOs developed plans and strategies to ensure that they could continue rolling out VAWG prevention and response activities. PHR postponed training sessions and events linked to improving the forensic evidence chain, and replaced them with debriefing sessions for first responders, and training on vicarious trauma and self-care measures. Al Shehab Institution for Comprehensive Development in Egypt provided PPE for programme beneficiaries, developed strict health measures for meetings and activities, developed hybrid modalities for most activities, rearranged its centres to better prevent the spread of COVID-19, reduced group sizes for outreach events, and opened a hotline for psychological support. FYF applied for special permissions so that staff could still move around despite countrywide travel restrictions, allowing at least some services to continue.

In addition, CSOs continued to ensure multi-stakeholder collaboration overall, which allowed relationships to continue and even strengthened them. For example, PHR continued to engage with the various stakeholders from different sectors, and partners saw how PHR prioritized them and their mental health. Al Shehab continued multi-sectoral collaboration by arranging (COVID-19-compliant) round

tables with stakeholders on the nexus between VAWG, HIV and COVID-19, and a one-day consultation with non-governmental organizations and service providers on the sustainability of VAWG prevention services during COVID-19. The pre-existing relationships with these stakeholders often helped in developing coping mechanisms and repositioning CSOs' roles creatively. Organizations that had deliberately taken a holistic development approach and positioned ending VAWG as a community-related issue were arguably better equipped to adapt and continue to work as experts with their multisectoral partners on other issues. Maintaining these relationships created opportunities for CSOs to be integrally involved in national and local COVID-19 responses by offering benefits and even funds. They were then able to raise issues related to VAWG prevention as part of their wider needs assessments:

[E]ven for police and the disaster response force, we were able to provide them with ambulances and ... different equipment where they do not have phone connection. We were able to give them satellite phones and the maintenance and subsequent usage and subscription were taken up by the government. Because we work with government in trying to supplement their programs, we did have a voice and ... we generated [funds]. So apart from the health workers and the local communities, we were also providing oxygen concentrators to the government officials and we were doing need assessments with them (FGD invitee, written response, 1 February 2021).

Running VAWG prevention programmes during COVID-19 has generated key lessons that are applicable to circumstances other than pandemics.

First, Al Shehab feels that the COVID-19 pandemic has highlighted the need to strategically rethink current models for service provision, including the provision of essential health-care services to key affected groups. It believes that COVID-19 has shown the urgency of adopting processes that are more resilient and cost-effective, ensuring that vulnerable communities continue to receive the essential services and support they need. While such change is of course essential in the midst of a pandemic, the reality is that resources are always too limited to comprehensively provide the services required

by survivors and those at risk. Therefore, a rethink of approaches and methods is long overdue. Second, PHR's shift to virtual meetings has highlighted that many in-person meetings can be replaced with virtual meetings, saving time and money and allowing more people to attend. While PHR's forensic evidence training sessions are very practical and require in-person attendance, the network meetings that facilitate multisectoral collaboration work well virtually – especially when they are follow-up meetings.

CSOs noted that VAWG prevention and response was not always recognized as an essential service and that in some contexts bias existed to keep it invisible in the reduced judiciary system.

In these contexts, women and girls may be more likely to turn to informal legal systems of compensation, which may or may not be survivor centred and can lead to the continuation of violent patterns. A positive insight from partners is that CSOs can play a role in lobbying government to recognize VAWG as an essential issue. Raising community awareness of the legal rights of, in particular, marginalized women and girls in rural areas, or those under tribal systems or with disabilities, formed a key component of the VAWG prevention side of many partners' work. This aspect of the work was also affected by limits on the number of people who could attend events and had a knock-on effect on targets set by donors.

The positive collaborative roles that several organizations played in developing the capacity of various government ministries to respond to COVID-19 were important in building systems-level relationships in the longer term, with indirect benefits for advancing VAWG prevention.

The increased national recognition of CSOs' partnerships with governments and shared advocacy and evidence-based strategies between CSOs on issues such as disability-aware COVID-19 responses and VAWG as an urgent issue for the judiciary were effective. For example, Leonard Cheshire Disability Zimbabwe (LCDZ) was able to have VAWG services recategorized at policy level as essential and urgent. By quickly identifying the reality of increases in VAWG through their interactions with women and girls, CSOs were able, in advance of official statistics, to lobby the government for a swift response to prevent further violence. This bottom-up approach to legal and policy

reform is an important “bridging” role that CSOs can play. They can bring immediate realities to the government’s attention in a timely way, enabling practical adaptations to be made, for example by identifying women and girls at increased risk of VAWG, such as those collecting water in areas made isolated by COVID-19 restrictions. A holistic development perspective, as taken by Pragya, built rapport with the government:

We also supported government hospitals with oxygen concentrators and things like that, so that again helped us build rapport and we did training for psychosocial support for the health workers that the government appreciated as part of the national disaster response. We delivered this content with the help of [a mental health institute] and they helped us design the content and we had small videos which used to go out as a series and then we made it available online for free (FGD, 23 November 2021).

Innovative adaptations and approaches to capacity development by CSOs have emerged alongside COVID-19, which in some cases have helped to fast track innovations that they were already developing.

This was particularly true of organizations supported by COVID-19-related donor funds:

Something positive happened, it also strengthened our organization. COVID-19 hit us unexpectedly, and our organization did not have the capacity to handle a disaster or [know] how to continue implementing [sexual and gender-based violence] work during a disaster. So through funding from [the UN Trust Fund], we were able to review our disaster risk reduction plan so that it’s all-encompassing – including how to end violence against women during a disaster ... It’s also changed the way we usually work ... with COVID-19 coming, we’re now using the radio programmes. They reach more people and help to [raise] community awareness in a particular area. So our numbers increased in terms of who can now access information about our services (FGD, 23 November 2021).

CSOs’ important bridging role between formal government systems and ordinary citizens became

more important during COVID-19, in terms of identifying emerging issues (related to VAWG) and bringing them to the government’s attention quickly, and using their established networks to facilitate the transfer of relief to those who needed it most. However, several CSOs, all of whom were working in contexts with potentially repressive governments, noted that COVID-19 regulations were being misused to prevent wider political protests, including those by WROs as part of larger people’s movements:

There were a lot of protests going on regarding the Citizenship Act that was introduced and so across India there were peaceful protests from the citizens, lots of women’s groups were involved, and COVID was used as the excuse to break up those protests and remove them ... trying to curb those citizens movements by using COVID-related rules (FGD, 23 November 2021).

CSOs also highlighted that maintaining positive relationships with government and legal systems at all levels throughout COVID-19 was essential. This meant working together on wider emergency issues as they arose to build trust and ensure that sustained system-wide gains on proactive laws and policies to prevent VAWG were consolidated and not reversed.

KEY TAKE-AWAYS

- COVID-19 made the work of CSOs on service provision and legal and policy reform and implementation far harder, as systems were overwhelmed with new requirements.
- CSOs developed several plans and strategies to ensure that they could continue rolling out their VAWG prevention and response activities, as well as ensuring multi-stakeholder collaboration, which strengthened relationships.
- A capacity-building perspective in working with governments can enable CSOs to bridge gaps between formal services and grass-roots realities and show the value of a holistic approach.
- CSOs noted that in some contexts VAWG prevention and response was not recognised as an essential service.

2.4. Building organizational resilience and adapting prevention programming during the COVID-19 pandemic

LITERATURE REVIEW

The COVID-19 pandemic created a fundamentally uncertain terrain for VAWG prevention and response; this required adaptation, offering opportunities for significant learning and innovation. Organizations' adaptive capacity – that is, their ability to foster innovation and support new practices in response to social and environmental changes (Smith et al., 2003) – proved to be a key indicator of success during the pandemic. This is about not only high-tech and large-scale innovation but also forming spontaneous or autonomous local initiatives in response to changing shocks and trends (Wongtschowski et al., 2009). Innovation is closely linked to knowledge and communication, which help organizations to understand how best to use the opportunities presented by a changing

environment, and to the asset base, which can determine the economic ability of organizations to take risks and find the resources to innovate (Jones et al., 2014). Programmes should be open to experimenting to learn from different possible solutions and/or strategies to achieve them, which requires them to be open to failure (O'Neil, 2016). Yet a review by O'Neil (2016) of gender and development programming notes that conscious and structured experimentation to test and adapt is the principle least applied in gender-related programmes, and in development programmes more broadly.

Despite the many challenges it posed for VAWG prevention programming, the pandemic fuelled innovation, creativity and opportunities, including new models of collaboration. For instance, some practitioners emphasized how strengthening remote programming could be useful in the long term; stronger capacities for remote programming support crisis preparedness and risk mitigation. Beyond Borders in Haiti adapted by using WhatsApp, social media, text messaging and phone calls to support activists. Activism activities were adapted for remote delivery (e.g. participatory radio programmes and smartphone chats), and megaphones were used for outdoor conversations:



EWEI staff at the third quarterly technical committee meeting with EVAW/GBV experts and partners to review the "Our Safe Space" project. Credit: Ibi Divine Doo/EWEI (Nigeria)

We developed tools to sensitize and educate people on how to work with disabled women and girls under times of crisis and the pandemic. We recorded small skits, ads [advertisements] and graphics. This was new for us. We still maintained in-person activities, but with COVID restrictions, we could not have more than 10 people (interview, 13 May 2021).

The most common adaptation across all prevention programmes was to digital tools, which was challenging and had several pros and cons. The duration of the pandemic pushed organizations to adapt their programmes to semi-online/remote methodologies and bring digital tools into the core of their work. They used a diverse range of technologies to continue their work: some set up Zoom, Google Meet or Skype sessions; others made videos and resources that could be shared remotely or through communication apps, or used teleconferencing to reach out to their stakeholders.

In several cases, training and mobilization activities continued online. AÇEV, for instance, used WhatsApp groups, and the trainers were able to support their cohorts of fathers remotely, sending them activities to do and weekly summaries to write. This generated a new online dynamic between the father participants, who began sharing photographs and videos with each other:

And then we started to think about a more sustainable way to support fathers, because COVID was not going away and it was getting worse and worse. So we came up with a new implementation model called “father meetings” ... It serves the purpose of strengthening the households that are in need, maintaining the well-being and supporting the development of children ... Held over a package sent to the participant fathers, father meetings are carried out with weekly video-sharing meetings over WhatsApp or Zoom. In the package, along with content that reinforces parenting skills with texts and activities, there are other materials like games and books that will support both the conversation and interaction between parents and children. Fathers also receive a weekly Internet package to cover their requirement of Internet data to ensure their participation. COVID has been hard, but we have tackled this period. Feedback coming from the field has been very positive (interview, 22 February 2021).

Some organizations pointed out the advantages of online activities. Online sessions could bring together many participants at a very low cost. Physical sessions were associated with greater costs: rental of space, catering, supplies, travel and accommodation, and per diems. Online sessions could also “get more people in the same space”, because participants were not necessarily restricted by their access or their mobility. This meant that people who typically would have faced obstacles in physically attending the sessions (e.g. women who are limited in their ability to travel) were able to join in. Some sessions were more gender-equitable as a result. Crises can also provide unexpected opportunities for new avenues of engagement. For example, during the COVID-19 crisis, Community Media Center in the State of Palestine moved its engagement online and created a programme on digital security for women. Breakthrough Trust in India reported a similar shift in focus and stated that online interaction could become an important area of its work.

Online sessions also introduced new challenges, often related to the digital divide that exists in society. There are significant barriers to Internet use, including differential access to the Internet, varying levels of mobile/Internet coverage and lack of use of local languages online. This divide is an emerging area of research, and it highlights the varying levels of confidence people have in acting and participating online, as well as the different cultural experiences of the Internet (Omidyar Network India, 2019).

Nearly all the organizations spoke about the new dynamics of online work; one of the big disadvantages of conducting online or remote training is that it is harder to foster a sense of shared learning between participants. In physical training sessions, a lot of the bonding happens during tea and coffee breaks when people come together to learn, converse and build relationships. It is also harder to train participants on practical aspects, such as medical examinations, online. When delivered online, training can lose some of its dynamism and become more didactic. Organizations must have the resources and support to design effectively for this space.

We spend so much time trying to foster and promote a brave space or a safe space ... that is very hard to do online. And so people, even if they're physically present, aren't always, you know, engaging to the

same extent. And I think honestly it takes a much, much larger amount of effort and consideration to ... make it participatory and interactive and inclusive and safe than doing that in a physical space, which is hard too (Raising Voices, interview, 18 February 2021).

Online platforms are a double-edged sword. In some contexts, they may further exclude those without access and prevent two-way dialogue, while in others they may offer opportunities, especially for marginalized women to overcome in-person gendered power dynamics. In Liberia, for example, as explained by practitioners from Episcopal Relief and Development, the shift to online platforms was unexpectedly effective in getting women community leaders to participate more actively in sessions. Before the COVID-19 pandemic, when (in-person) training sessions and meetings were held with faith leaders, women leaders were always in the minority. They were also very quiet in the meetings, rarely actively participating. However, when these training sessions and meetings were hosted on online platforms, these women found their voices:

One thing we notice of COVID-19 is that [by] using technology and Zoom, the woman faith leaders seem to have a better knack for that and they suddenly became very vocal, now that they are in a meeting, but not in the same room in the same space (FGD, 1 December 2020).

Developing the digital architecture at systems level and policies around this will be important to ensure that CSOs and wider networks stay connected. Patterns of collaboration are at risk of unravelling in the long term under social distancing rules. Many CSOs struggle to fund these types of organizational shifts, which will be needed to create new platforms to support women and enable VAWG prevention in virtual spaces and to build back better post-COVID-19:

It increased our capacity for ICT infrastructure; this was something that we were working on for the last 2–3 years but the funding came through during the COVID lockdown so we were able to leverage that and that allowed us to equip grass-roots workers with laptops and smartphones and for us at the head office to have

computers with design capacity and to record podcasts and things like that so we could invest in that platform (FGD, 23 November 2021).

Finally, building wider policies and systems within CSOs to adjust to COVID-19 realities in ways that build the resilience necessary for other disasters and emergencies is key. For example, organizations pointed to donor assistance during the pandemic enabling them to strengthen their communication systems, especially ICT systems, and to become more resilient to disasters, moving towards new ways of working in hybrid ways that will continue post-COVID-19 and may be highly relevant to work with rural or remote populations in the longer term:

[W]e had to deliver a lot of content through digital platforms and had limited capacity. But now communications is one of our major teams, because much of the work has shifted online and so we had to invest [in digital platforms] ... because we work in very remote areas they do not have many places for Internet access or the Internet packs they have they would run out ... and so we have a hybrid approach where some people can join on the live sessions, where they have network or where we can facilitate, and otherwise we put those things down into smaller videos ... the volunteers can then go to the villages and have meetings with three to five people and show them the video and have a discussion ... we had a very steep learning curve on this (FGD invitee, written response, 23 November 2021).

One important issue that emerged around VAWG prevention specifically in relation to digital platforms was safety and confidentiality, especially if people were in lockdown with abusers.

[W]e also had queries about how to deliver those services securely, if you're having some discussion on sensitive issues, which platform you should use from a security point of view where people could join? We did not figure that out as yet, so we didn't have those kind of sensitive discussions (FGD invitee, written response, 23 November 2021).

All organizations stressed that adapting was necessary for the pandemic but also useful for other present and future crises and that adaptations made in previous crises were useful in the pandemic.

Beyond Borders practitioners, for instance, noted that the innovative approaches adopted during the pandemic would be useful in other crises in Haiti that require remote engagement:

[There were] opportunities for learning in terms of how to use our materials [remotely], activate a network from a distance, which will be useful in [future when] we cannot get to our communities directly. This led to creative thinking and ideas (FGD, 25 May 2021).

RRRT staff similarly reflected on the benefits of shifting to radio programming:

It was a positive shift because it became more generalized, given radio [offers] better access to information for rural communities where they don't have access to many other forms of information and services; it meant we were reaching a wider group beyond just those project provinces. The radio reaches a wider audience and not just one community. Smaller gatherings and groups are good for impact, but it is a huge burden on project staff and a huge cost, hiring a boat to go to each village costs SI\$3,000 (interview, 12 May 2021).

Organizations that had already worked in a crisis context had several advantages. For instance, PHR's experience of working in public health and in crisis contexts in the Democratic Republic of the Congo was an advantage in that it was able to understand the public health consequences of COVID-19 early on. Several of its training sessions were moved online and, where it was constrained by lack of Internet connectivity, it made videos that were shared through its networks.

In the light of the COVID-19 pandemic, almost all practitioners adapted their interventions to have a stronger focus on self-care and well-being.

For instance, PHR identified the importance of self-care activities, especially given its work with health professionals:

One thing we saw to be increasingly important was training on self-care and resilience and creating space for service providers and professionals to debrief and decompress. This work is tough on us and on service providers (FGD, 4 May 2021).

Similarly, Women's Justice Initiative in Guatemala prioritized providing staff members with emotional support and budgeted for monthly group therapy sessions with a psychologist to teach individual and collective self-care strategies. Women's Justice Initiative had already recommended that the UN Trust Fund make self-care a required budget line in 2019, especially for small organizations that do not have the ability to provide such support services. The UN Trust Fund included a mandatory budget line for self-care (of \$2,000) for all small grant applications from cycle 21 (2017).

KEY TAKE-AWAYS

- Despite the many challenges it posed for VAWG prevention programming, the pandemic fuelled innovation, creativity and opportunities, including new models of collaboration.
- The most common adaptation across all programmes was to digital tools, which had pros and cons. They may further exclude those without access, prevent multi-level dialogue and create safety and confidentiality issues. However, they may offer opportunities, especially for marginalized women to overcome in-person gendered power dynamics.
- Increased digitalization at systems level and the development of policies around this will be important to ensure that CSOs and wider networks stay connected. Patterns of collaboration are at risk of unravelling in the long term under social distancing rules.
- Adaptations were necessary for the pandemic but also useful for other types of present and future crises, and lessons learned in previous crises were useful in the pandemic.
- Almost all practitioners focused more in their interventions on self-care and well-being.

3. RECOMMENDATIONS

The COVID-19 pandemic continues to have severe impacts on women and girls, and after two years, CSOs and WROs are still grappling with the constantly evolving nature of the crisis. Despite the many challenges it has posed for VAWG prevention programming, the pandemic has also fuelled innovation, creativity and opportunities, including new models of multi-partner collaboration and a voice in new policies. It will be important to build on these gains.

Recommendations for practitioners

- 1. The pandemic has magnified the importance of ensuring space and opportunities for self-care to build the well-being and resilience of front-line responders.** CSOs, WROs and women's rights defenders have experienced stress, anxiety and vicarious trauma as they navigate the ongoing impacts of the pandemic and increased need for their services, while continuing to operate in an uncertain environment. It is important to use positive, aspirational materials, provide information about support services, and avoid highly sensitive or provocative content, as women and men may have limited support to process difficult topics during the pandemic.
- 2. COVID-19 has highlighted the importance of community volunteers.** While organizations were limited in what they were allowed to do and where they were allowed to go, their community volunteers continued providing essential services and support to survivors and at-risk women.
- 3. A capacity-building perspective in working with governments can enable CSOs to bridge gaps between formal services and grass-roots realities and show the value of a holistic approach.** Formal government and legal systems have been under high pressure as a result of COVID-19, and collaboration on other issues, such as VAWG, was deprioritised. CSOs must develop shared agendas to ensure that COVID-19 responses take VAWG prevention into account and that long-term gains made through multi-sector collaboration are not reversed.

Recommendations for donors

- 4. Support WROs and CSOs, particularly grass-roots organizations. Grass-roots organizations are in a good position to adapt to meet the COVID-19-related needs of women and girls and address key risk factors for VAWG in the pandemic,** given their access to knowledge and information, and their ability and agility to pivot programming. Such organizations are therefore vital and it is important to support them to work in more innovative ways.
- 5. Investing in the resilience of organizations is highly important,** through flexible, core funding and long-term funding.
- 6. Investing in safe, ethical and adaptive digital infrastructures is key.** Digital initiatives necessitated by pandemic restrictions were a common form of innovative adaptation. They can allow grantees to reach more people, but they must be accessible and effective. Learning how to work remotely more effectively can prepare organizations to respond to future crises.

Recommendations for researchers

- 7. More research and investment in research is needed on what worked and why in prevention programmes during the pandemic.** There is a need for more action-oriented studies that aim to pinpoint what works to prevent or respond to violence for specific forms of violence and spaces.
- 8. Crises create opportunities to learn lessons.** During the COVID-19 pandemic, some organizations were able to draw on lessons learned from other crises, and lessons learned from the pandemic will be relevant to future crises.
- 9. More research is needed on the importance of adapting programming to changing key risk factors for VAWG.** Moving VAWG prevention up the agenda means making it relevant to the COVID-19 context (e.g. digital divides and the escalation of violent coping mechanisms).

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FURTHER INFORMATION:

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