



THE IGNORED PANDEMIC

The Dual Crises of Gender-Based Violence and
COVID-19

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Gender Based Violence (GBV) is a global pandemic existing in all social groups across the globe, yet it has largely been ignored in the COVID-19 response and recovery plans.

It is evident that the COVID-19 pandemic has intensified GBV, including domestic violence and intimate partner violence amongst other forms of violations, but the investments in GBV prevention and response are dramatically inadequate, with just 0.0002% of the overall COVID-19 response funding opportunities going into it. Barriers to achieving gender justice, such as harmful social norms continue to exist, but progress made since the start of the 16 Days of Activism Against Gender-Based Violence Campaign show that there are solutions and feminist activism has been a driving force for progress on eliminating gender-based violence.

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For further information on the issues raised in this paper please email advocacy@oxfaminternational.org

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Cover photo: Monica is a Colombian human and territorial rights defender, and part of the 'Force of Wayuu Women', who has been displaced from her community after receiving death threats because of her activism against mining companies that polluted the river Aguas Blancas. She continues her work in spite of the threats to her life. © Pablo Tosco/Oxfam.
Back cover photo: Eastern Highlands, Papua New Guinea: brothers, Dirua* and Suri* (yellow t-shirt), with their families, who are all survivors of sorcery-accusation violence.

FOREWORD

This year's commemoration of the 16 days of Activism against Gender-Based Violence (GBV) marks thirty years since women's rights activists launched it at the inaugural Centre for Women's Global Leadership. It is a time to reflect on the immense gains that feminist movements have made – that is lived through the safety and opportunities of women and girls, across the world.

And it is, crucially, a time to renew our commitment to end GBV that is faced by girls, women, including trans women, non-binary people, and LGBTQIA+ people more broadly – once and for all. Gender-based violence stubbornly remains one of the world's most pervasive human rights violations.

Today, we face a setback. The pandemic has seen a reported increase in cases of GBV – especially intimate partner violence – that has led to the loss of lives, injuries, anxiety, emotional distress, and more. During lockdowns, GBV helplines reported an increase by 25-111 percent in calls in some countries, while some others saw a drop.

Across the globe, spiralling economic and gender inequalities are conspiring to deepen the suffering that girls, women – including trans women, and non-binary people face. In Latin America we know this well. It is no coincidence that our region, the most unequal in the world, is also home to 42 of the world's most dangerous cities to live, and most countries with the highest rates of femicide.

There is more. The impact of the pandemic has deepened long-standing gender gaps in the economy: with women more likely to drop out of the labour force. The global employment loss lost women \$800 billion in income in 2020. An additional 47 million more women worldwide are expected to fall into extreme poverty in 2021. Economic insecurity due to mass unemployment, directly linked to the pandemic, has increased women's vulnerability to violence in the home.

Yet, look deeper, and we find steely resistance. It is led by women's rights organizations (WROs). It is feminist activism. Look no further than #MeToo, #NiUnaMenos, #SayHerName, and #BalanceTonPorc. This paper highlights cases of WROs courageous efforts, from Palestine to Malawi to Brazil.

They are driving – often against immense barriers – the prevention and response efforts of GBV. But they have also faced deep budget cuts due to the pandemic, forcing some to downsize and, in some cases close shop. This is – right now – holding back prevention and response efforts, and WROs ability to participate in decision-making spaces and shape the policies and politics to meet women's rights, just when they are needed most.

As this paper shows, GBV is an ignored pandemic that needs a systemic and intersectional response more than ever. In countries across the world, the coronavirus has shown that, when spurred to action, governments can take extraordinary measures to meet people's human rights.

Governments, donors, and civil society must place women's rights organizations, movements, and leaders at their core to take on GBV. As a priority. We need to propel the bold and ambitious rethinking, policies, and funding behind tackling GBV, including sexual violence. We need to rethink our decisions and remove the systematic barriers that allow this scourge to

thrive. We need to address the harmful social norms that prosper GBV – and reimagine our economies as economies that tackle many root causes of GBV. We all have a role to play.

Above all – we must believe – GBV is never inevitable. It is upon us to end it.



GABRIELA BUCHER, EXECUTIVE DIRECTOR, OXFAM INTERNATIONAL

SUMMARY

Long before COVID-19, women, including trans women, and girls and LGBTQIA+ people were already facing an equally devastating but largely ignored pandemic. Gender-based violence (GBV) is among the most common causes of death, injury, and mental and emotional suffering globally, one of the world's most widespread violations of human rights and a lethal global health crisis.¹ 1 in 3 women - around 736 million - will experience physical or sexual violence by an intimate partner or sexual violence from a non-partner across their lifetime.²

Globally, the prevalence of violence against women and girls by an intimate partner in 2018 was higher than the prevalence of COVID-19 in the past 12 months,³ throwing into sharp relief the disparity in attention and resources each crisis has received. Coronavirus has devastated efforts to prevent and respond to GBV and catalyzed an explosion in global GBV case numbers.⁴ Data from ten countries shows calls to domestic violence or GBV helplines increased by 25 to 111% in the first months of the pandemic as women, including trans women, and girls and LGBTQIA+ people were isolated with their abusers and cut off from social networks and essential and life-saving services.⁵

While 146 UN member states and observers have declared support for prioritizing efforts to address violence against women in national coronavirus response plans,⁶ few have followed through, and globally GBV accounted for just 0.0002% of \$26.7 trillion in coronavirus response funding opportunities.⁷

The COVID-19 pandemic has also shown that when spurred to action, governments can take extraordinary measures to protect their citizens and respond to deadly health crises.⁸ This November, the world will celebrate the 30th anniversary of the 16 Days of Activism Against Gender-Based Violence Campaign, an opportunity to celebrate progress that has been made, note the roadblocks that remain, and call on governments and international institutions to renew their efforts to reduce the global burden of GBV. In this paper, we will explore the impact of coronavirus on victims and survivors of GBV, consider the implications of a continued failure to respond, and call for a stronger link to be made between efforts to recover from COVID-19 and efforts to end the less recognized but equally devastating GBV pandemic.

Defining gender-based violence

Gender-based violence (GBV) refers to any act of physical, psychological, sexual or economic violence directed against a person or group on the basis of their gender, sex or non-conformity to gender norms and stereotypes. It is an expression of unequal power relations, underpinned by social norms and beliefs linked to dominance, power and abuse of authority, and formalized through the laws, policies and regulations of social institutions.⁹ GBV can take many forms, including physical, psychological and sexual violence, as well as social violence which cuts survivors off from their communities or social groups, and economic violence, which results in economic deprivation.¹⁰

The 16 Days of Activism Against Gender-Based Violence

Launched in 1991 by the Centre for Women's Global Leadership (CWGL), the 16 days run annually from 25 November, the anniversary of the deaths of activists Patria, Minerva and Maria Teresa Mirabal in the Dominican Republic, to 10 December, International Human Rights Day. To date, more than 6,000 organizations in around 187 countries have participated in the Global 16 Days Campaign, raising awareness, building solidarity and calling for recognition of GBV as a violation of human rights. For more information, visit 16dayscampaign.org

Holding ourselves accountable

Oxfam acknowledges our own history in failing to support and protect the survivors of GBV and not holding ourselves accountable for violence perpetrated by former staff. We have pledged to address these failings and to invite external scrutiny of our policies and procedures going forward. Through our campaigns, programming and research, we hope to honour all survivors and address the harms we have caused.

To learn more about how Oxfam is working to improve our policies and practices, please visit <https://www.oxfam.org/en/immediate-response-actions-sexual-misconduct>

THE IMPACT ON VICTIMS AND SURVIVORS

Women, including trans women, and girls and LGBTQIA+ people faced an overwhelming surge of violence from the earliest days of the COVID-19 pandemic, and women's organizations and frontline responders were quick to sound the alarm.¹¹ In many households, coronavirus created a 'perfect storm' of social and personal anxiety, stress, economic pressure, social isolation (including isolation with abusive family members or partners), and rising alcohol and substance use,¹² resulting in increases in domestic

abuse.¹³ Calls to domestic violence and GBV helplines increased by 25 to 111% in some countries¹⁴, while in others domestic abuse killings tripled during early lockdowns.¹⁵ Services became harder to reach as many people assumed they were closed, stayed away due to fear of infection, or were unable to reach out for help due to their abusers being at home all day, monitoring their phone and internet use.¹⁶

According to the National Commission for Women, domestic violence increased by 250%¹⁷ in India's first wave of lockdowns, leaving services struggling to meet demand. Oxfam India spoke to domestic violence counsellors who reported feeling overwhelmed and helpless, unable to give sufficient time to each client, struggling to set up virtual services due to poor phone and internet connectivity, and unable to reach and support people whose partners were controlling their access to phones or those who were grievously injured or suicidal. On top of their counselling roles, they were also trying to coordinate food relief and deliveries of medicine for desperate callers. One spoke of trying to take a woman suffering from broken bones to hospital, having been beaten by her husband, and being turned away due to COVID-19 restrictions.

Outside of their homes, women were regularly forced to disobey curfews, lockdowns or stay-at-home orders due to their need to earn a living, to find food and water for their households, or to perform the care work society disproportionately expects of them and which, also increased during the pandemic.¹⁸ More than 90% of women workers in developing countries are employed in the informal sector,¹⁹ lacking employment protections and social safety nets such as coronavirus relief payments. With little choice but to continue working, they faced harassment and brutalization by police and military authorities enforcing coronavirus control measures such as checkpoints, quarantines and curfews.²⁰ Equally, in sectors of the workforce where women, including trans women are overrepresented, such as the domestic work and healthcare sectors, workers have seen dramatic increases in violence,²¹ as have migrant women workers, isolated with their employers and unable to reach family and support networks.²²



In Papua New Guinea: Marie* investigates gender-based crimes. ©Keith Parsons/Oxfam

Although almost a third of women in Brazil are Black, they accounted for two-thirds of women murdered in the country in 2018 and domestic violence reports soared by 50% during the COVID-19 pandemic.²³ Many women were also forced to face violence outside of their homes in order to work or risk being pushed further into poverty. Almost half of Brazilian Black women work in the informal sector²⁴ and they represent 74% of informal domestic workers, lacking access to social protection and labour rights. 64% of households with children under 14 headed by Black women live below the poverty line.²⁵

In 2020, an unprecedented number of Black women ran for office in Brazil's election, in a country where they previously held less than 3% of seats in legislative councils. Increased representation is vital, given the economic and social crises that Black women face.

In some places, the forms that GBV takes have changed, while the overall picture remains consistently grave. For instance, in some areas the dramatic reduction in use of public transport led to fewer reports of sexual harassment, while in others the lack of bystanders increased women's chances of being attacked.²⁶ Some violence has moved out of physical spaces into online ones, with increases reported in cyberstalking, bullying and sexual harassment.²⁷ Equally, the GBV that women, including trans women, and girls are facing appears to be more severe and sustained, perhaps reflecting the intensity of lockdowns and increased difficulty in escaping abuse.²⁸ GBV counsellors who spoke to Oxfam India reported an increase in callers reporting bites, burns, repeated beatings and being constantly pressured by their partners to have unwanted sex.²⁹

The surge of violence has disproportionately affected those who were already most likely to experience GBV – those facing intersecting and compounding oppressions on the basis of gender, race, class, sexual orientation and other characteristics. For example, those without secure and stable accommodation,³⁰ who in many contexts are disproportionately LGBTQIA+ and racially marginalized, and women in fragile or conflict-affected settings. An International Rescue Committee survey in 15 countries found that 73% of refugee and displaced women reported increased domestic violence during the COVID-19 pandemic, and 51% reported increased sexual violence.³¹

In August 2020, Beirut was ravaged by an explosion that caused more than 200 deaths and massive destruction over a 10km radius. The areas destroyed included queer-friendly neighbourhoods and the restaurants, bars and community spaces where LGBTQIA+ people gathered together, found a measure of safety and had been able to organize. The blast also destroyed housing, meaning that in the midst of the COVID-19 pandemic many LGBTQIA+ people had no choice but to move back in and quarantine with intolerant or abusive family members, while losing contact with their supportive social networks. Recent research published by Oxfam in Lebanon showed that 62% of LGBTQIA+ people reported increased exposure to violence in their living spaces as a result of the COVID-19 pandemic and the worsening economic situation in the country.³² A high percentage of LGBTQIA+ people in Lebanon work in the food, beverage and retail industries, the gig economy and the informal sector, and their economic independence has been hit hard by both the pandemic and the impacts of the explosion.

Women, including trans women and girls and LGBTQIA+ people's already limited options were cut further by coronavirus. The International Labour Organization (ILO) estimates that 64 million women lost jobs in 2020,³³ increasing their dependence on abusive partners and family members.³⁴ At the same time, their work has had to expand to fill care gaps created by the closure and restriction of public services such as schools, leaving them time-poor, overburdened and physically, socially and economically exhausted – and therefore less able to resist abuse. Women's economic independence is further eroded by violence itself, the majority or a significant portion of the estimated \$1.5 trillion³⁵ global cost of which is borne by survivors in the form of medical bills, lost work and other expenses.³⁶

These impacts are likely to be felt far into the future, for example through reduced lifetime earnings, lost contributions to pensions and reduced access to education. Adolescent girls, in particular, have faced a range of issues that are likely to increase their risk of facing GBV across their lifetimes, including being pulled out of school,³⁷ being refused access to sexual and reproductive health information and services, and being forced to marry early, which are all risk factors for later GBV.³⁸ Ten million more girls are at risk of becoming child brides by 2030, and with coronavirus disrupting interventions to curb the practice, an additional two million cases of female genital mutilation (FGM) are expected in the same time span.³⁹

As COVID-19 infections increased and schools closed, most young women and girls in South Sudan were cut off from education and hit by a devastating surge of challenges. Some were married off by families suddenly desperate for dowry payments, forced to exchange sex for food or money for their households, or risked sexual assault each time they left home to collect food and water. In some cases girls were beaten for refusing to marry, and some felt they had no choice but to run away from home. There has been an increase in teenage pregnancies during the COVID-19 pandemic. Given prevailing social norms and stigma, pregnant teenagers and those with children will face significant challenges continuing their education and will also be more vulnerable to future violence.⁴⁰

Coronavirus has created new barriers to women, including trans women, and girls and LGBTQIA+ people accessing vital, life-saving services. Only 15% of countries examined by the UNDP COVID-19 Gender Response Tracker have recognized GBV prevention and response as essential, enabling service providers and frontline responders to operate more freely during lockdowns and making them eligible for emergency funding.⁴¹ As a result, a survey by UNICEF found that violence prevention and response services, already insufficient to meet demand, had been severely disrupted in more than 104 countries.⁴² At the same time, policing resources have been diverted into coronavirus response and courts and health services have closed down,⁴³ narrowing options for seeking help and justice,⁴⁴ and accessing sexual and reproductive health services has become much harder,⁴⁵ with serious implications for those facing sexual abuse or the aftermath of sexual assault.

Far from inevitable, the increased violence that women, including trans women, and girls and LGBTQIA+ people have faced is in large part a direct

and avoidable consequence of decisions taken by governments and other decision makers.⁴⁶ In the last 12 months there have been almost 199 million confirmed cases of COVID-19. While we look at the disastrous impact on people and society, 245 million women and girls were subjected to sexual and/or physical violence by an intimate partner in 2018.⁴⁷ Exceeding the number of COVID-19 cases in the last 12 months year by more than 46 million. Yet only a handful of governments have made efforts to respond to the scale of the crisis; for example, New Zealand have introduced national protocols and classified GBV service providers as essential workers, while the South African government has taken steps to strengthen reporting channels.⁴⁸ However, while 146 UN member states and observers have declared support for prioritizing efforts to address violence against women in national coronavirus response plans,⁴⁹ few have followed through, and globally GBV accounted for just 0.0002% of \$26.7 trillion in coronavirus response funding opportunities.⁵⁰ One five-country study found that while international financial institutions (IFIs), including the World Bank and African Development Bank, extended a combined \$11.74bn in coronavirus response funding, either a meagre fraction or none of this was devoted to GBV response.⁵¹

Women's and feminist organizations have tried to step up to fill the gaps,⁵² despite facing challenges such as the threat of infection, reductions in mobility, increased care work, and burn-out. In an Oxfam snapshot survey, 222 women's rights organizations reported shrinking access to decision-making spaces, reduced funding and resourcing, operational and logistical problems such as lack of access to internet for remote working, and mental health and social impacts on their staff. Thirty-three percent had had to lay off members of staff, and 9% had faced closure.⁵³

In the Occupied Palestinian Territory (OPT), ongoing military occupation and patriarchal social norms have compounded the trauma of pandemic lockdowns and increased the threat of GBV. SAWA, a women's rights organization with 22 years of experience, has fought to meet increased demand from callers to its crisis hotline, which offers counselling, health, mental health, legal support and information services. With support from Oxfam, SAWA expanded the service from 16 to 24 hours a day, seven days a week, with staff managing to answer 65% of calls received. To prevent burnout and protect the mental health of their staff and counsellors, they have provided regular debriefing sessions and group supervision and have worked to promote self-care and safeguard the wellbeing of all involved.

Women's groups in Malawi's Phalombe, Balaka, Mulanje, Lilongwe and Dowa districts have formed the frontline in efforts to prevent and respond to both the coronavirus crisis and the accompanying spike in GBV. With training from Oxfam and partners CAVWOC and GENET, they donned personal protective equipment and headed out into their communities, conducting awareness campaigns that reached more than 62,000 people, challenging perpetrators of violence, rescuing 78 girls from forced marriages and convincing their families to send them back to school. Violet Luka, chairperson of the Ruo Women's Group, said: 'In the past it was impossible for women to take the lead in such initiatives, however, this is no longer a thing in my community. People now have confidence in us leading change.'

Where they have been unable to provide their usual services, these groups have pivoted and adapted, finding creative ways to continue to serve their communities.⁵⁴ The increased resources and effort required have been considerable, including the costs of personal protective equipment, computer equipment and training in new technologies.⁵⁵ Despite their best efforts, the shift away from in-person service provision and towards virtual services has most impacted those with the least access to technologies, such as women, including trans women, and girls and LGBTQIA+ people living with disabilities that affect their hearing or ability to read screens.⁵⁶

Governments are set to make the situation even worse and use COVID-19 spending as cover to slash budgets and cut back on services during the recovery period, with the support and encouragement of international financial institutions such as the International Monetary Fund (IMF). In the aftermath of the crisis, the IMF has advised or required countries to pursue austerity in 85% of its COVID-19 loans as of March 15 2021.⁵⁷ IMF government expenditure projections suggest that 6.6 billion people, or 85% of the global population, will be living under austerity conditions by 2022,⁵⁸ likely resulting in additional cuts to lifesaving GBV prevention and response.⁵⁹

Coronavirus has made it even harder for survivors of sexual violence in Ghana to access justice. While by law survivors are entitled to free medical care, to file a formal complaint with the police they need an examination report from a medical professional, which can cost up to 800 Ghanaian cedis (\$130 USD), more than many women's monthly wage, particularly in rural areas. As rates of violence climbed during the pandemic and women's incomes reduced, even fewer women could afford to file a report, increasing impunity for perpetrators and cutting women off from a process that many find vital for healing. Ghana's Ministry of Gender, Children and Social Protection has pledged to fix the problem by the end of 2021, a promise women's groups are lobbying to hold it to.⁶⁰

THE IMPACT ON PREVENTION

Activism to end GBV became harder and more dangerous during the COVID-19 pandemic. Amazingly, in the face of lockdowns and closures of civic and community spaces, and despite the risk to their health and safety, women's organizations, movements and human rights defenders have continued to protest, organize and hold their governments to account.⁶¹

In the Philippines, the COVID-19 pandemic and gender inequality have compounded the threat of armed conflict, prolonged displacement and climate disasters to foment an increasingly dangerous environment for young women, with reports of increases in forced marriage in evacuation centres, sex trafficking, online abuse and adolescent pregnancy.⁶²

Before the pandemic, one in six girls in the Philippines were already married before the age of 18. Despite the challenges presented by lockdowns, the Girl Defenders Alliance – which includes law makers, youth campaigners, women's rights organizations and government agencies – mobilized thousands of women and girls to take part in physical and online demonstrations in support of a Bill prohibiting child marriage. The Bill passed both houses of congress in September 2021 and is now awaiting presidential approval.

The need to take activism and organizing online during lockdowns has also increased the risks of online surveillance by repressive governments and other bad-faith actors.⁶³ Women human rights defenders who have criticized their government's response to coronavirus have had their social media accounts suspended, lost their access to online spaces,⁶⁴ been harassed, threatened, detained, incarcerated and disappeared.⁶⁵ Some governments have used the turmoil and confusion created by the COVID-19 pandemic to roll back hard-won rights,⁶⁶ curtail protests and silence activists and journalists.⁶⁷ According to the International Institute for Democracy and Electoral Assistance (IDEA), by the end of November 2020 nearly 61% of countries had implemented pandemic-related measures that were concerning from a democracy and human rights perspective.⁶⁸

Colombia is among the most dangerous countries in the world for women human rights defenders because they defend land and environmental rights, which puts them in conflict with powerful business and government interests, and because many are peasant farmers, Indigenous or of African descent, and as such are targets for gendered and racialized violence including sexual violence, threats, killings and disappearances. As coronavirus took hold and legal and illegal armed actors moved into rural communities, ostensibly to carry out pandemic control measures, they also used violence to restrict the actions of women leaders and provide cover for extractive industries to operate with impunity and violate human rights. The government has also used the crisis to push for measures that limit the participation of women leaders in decision making.



Janeth Pareja Ortiz is a defender of human, territorial and environmental rights. © Pablo Tosco/Oxfam

Sadly, in spite of their organizing efforts, the voices of women, including trans women, and girls and LGBTQIA+ people have been side-lined in national coronavirus responses. The UNDP and UN Women found that of 225 coronavirus task forces in 137 countries and territories, only 4.4% had gender parity, 84% were dominated by men, and 24 countries had no women represented at all,⁶⁹ resulting in weak responses that failed to prioritize issues of primary concern to women such as GBV and unpaid care.

In Myanmar, women held less than a third of parliamentary seats and just 1% of leadership positions at the local or village-tract level before the COVID-19 pandemic, a power disparity that deepened with the military's seizure of control in 2021. Accordingly, as pandemic response committees were drawn up, their composition reflected pre-existing male-dominated governance structures, and women, marginalized ethnic groups and LGBTQIA+ people have struggled to influence programmes and budgets that largely failed to address their concerns. In response, these groups have banded together to create their own support networks and find creative solutions to the problems they face, despite women's organizations being officially barred from taking part in some official committees.⁷⁰

The harmful social norms (informal rules that govern attitudes and behaviour) that underpin GBV have been reinforced during the COVID-19 pandemic.⁷¹ In response to coronavirus, governments around the world have run large-scale campaigns to change social norms, attitudes and behaviours. From encouraging mask wearing, physical distancing and handwashing, to discouraging traditional greetings such as shaking hands, campaigning at scale has shifted attitudes and led to widespread behaviour change. COVID-19 has shown to all of us, norms, attitudes and behaviour change is possible. Interventions that address the social norms underpinning GBV (such as ideas about male dominance and heteronormativity) haven't yet received the same investment, despite having proven effective.⁷²

While the Bolivian government encouraged citizens to stay 'safe' at home, they neglected to consider what that might mean for women, girls and LGBTQIA+ people confined with their aggressors. The pandemic exposed what has long been an open secret – that home is not a safe place for women. In response, young people from the country's seven biggest cities have come together to analyse the root causes of the surge in GBV, the justifications given for it, the structural factors that lead to an unequal distribution of power within families, and the unequal distribution of care work.

Indeed, some of the measures governments have taken during the COVID-19 pandemic have inadvertently reinforced harmful norms and male power, for example by restricting movement outside of the home to 'heads of household' or allowing women and men to leave their homes on different days, a policy that has led to brutal attacks against transgender people.⁷³ Some countries have further normalized state and militarized violence through the use of increasingly militarized language around 'fighting' or 'combatting' the virus and expanding the presence of armed forces in the streets, rather than community or health services, to enforce coronavirus control measures.⁷⁴

IS ENDING GBV POSSIBLE?

Ending GBV is possible, and analysis in 70 countries over 40 years has found that the most vital and consistent factor driving policy change has been feminist activism.⁷⁵ Feminist movements and organizations have changed

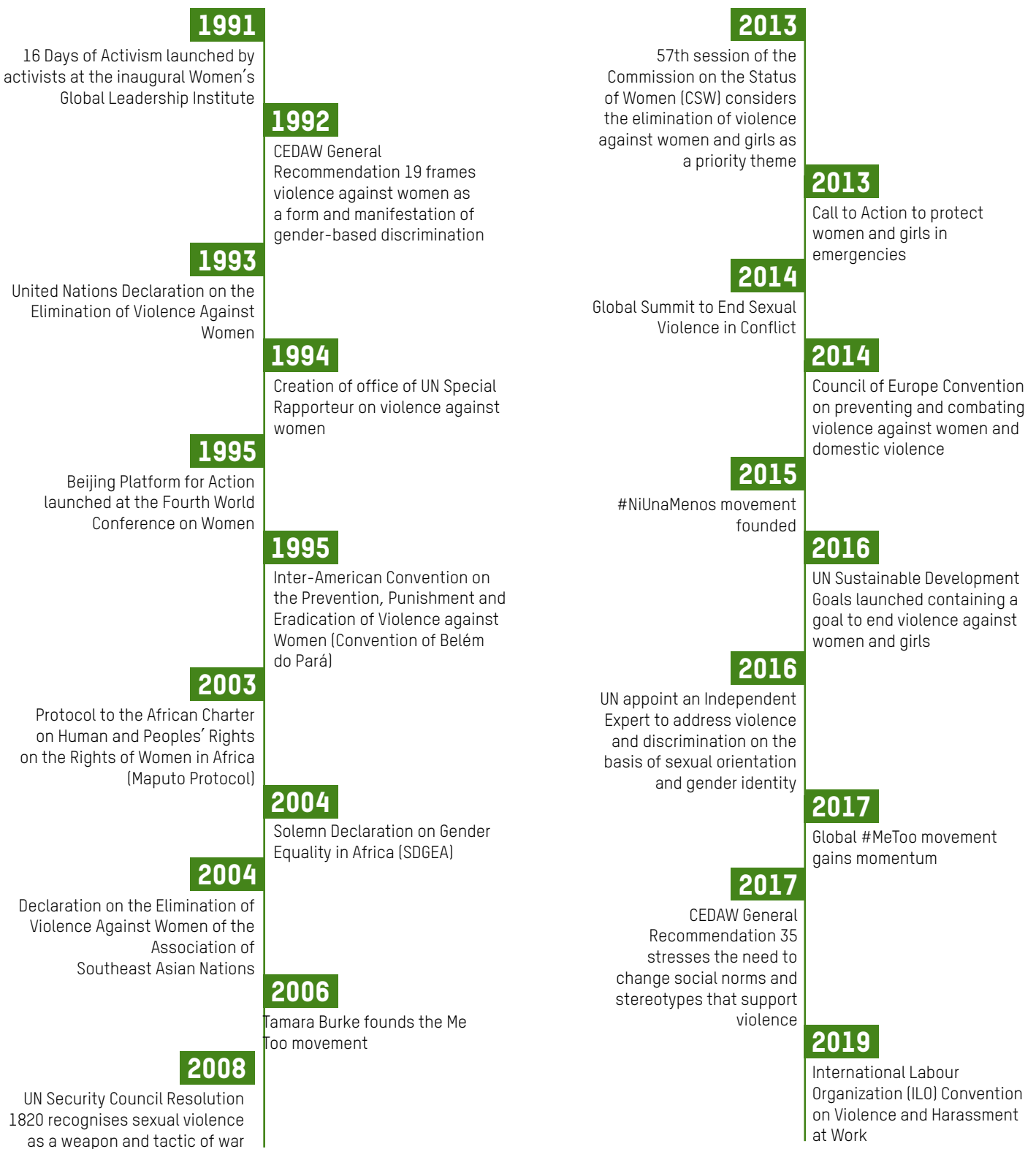
the way we think about GBV, drawing attention to the issue and stirring global sentiment, for example through the global outpouring of outrage, grief and solidarity connected to the #MeToo, #NiUnaMenos, #SayHerName and #BalanceTonPorc uprisings, while also deepening our understanding of its root causes and the interventions that are most effective in addressing it. Since the first 16 Days of Activism in 1991, enormous progress has been made, both in advancing the world's understanding of GBV and its causes, and in adapting the legislative and policy frameworks that govern responses to it.

Inevitably, the backlash has been furious and sustained, often framed as a response to a perceived threat to 'traditional' family composition and values, a threat to cisgender men's traditional roles and structural power, and in opposition to evolving attitudes to sexual orientation and gender identity.⁷⁶ This has enabled a diverse anti-rights coalition to form, composed of fundamentalist religious actors from across the dominant religions, authoritarian leaders and regimes, and others, including far-right militant groups and internet trolls, who employ identity politics alongside physical, social, psychological and online violence as part of their ideological crusades. These are closely allied and overlap with other regressive movements, particularly those espousing nationalist, anti-rights and racist ideologies.⁷⁷



In Port Moresby, Papua New Guinea, Nancy, a survivor of domestic violence receives counselling from the organisation Lifeline. © Keith Parsons/Oxfam

KEY MILESTONES FROM 30 YEARS OF ACTIVISM TO END GBV



The growing influence of right-wing populist movements has led to countries rolling back previously agreed standards, such as in the case of the Government of Turkey's decision to withdraw from the Istanbul Convention in July 2021.⁷⁸ While in many countries, women's movements have faced restrictions on their access to funding, exclusion from key decision-making spaces, online and physical violence, smear campaigns aimed at discrediting them, and backsliding on the policies and commitments to gender equality which they have fought so hard for and which underpin their work.⁷⁹

Without concerted action the legacy of coronavirus, in coordination with these forces and global trends, including neoliberal globalization, militarization and the rise of religious fundamentalisms, has the potential to wither support for addressing and ending GBV, while increasing the threat of violence to women, including trans women, and girls and LGBTQIA+ people. The anniversary of the 16 Days of Activism provides an important opportunity for governments and international actors to take stock of progress and live up to their commitments, ensuring that their efforts centre survivors and frontline responders, and address patriarchy and the root causes of GBV. Their efforts should include action to:

1. STRENGTHEN AND RESOURCE WOMEN'S AND FEMINIST ORGANIZATIONS AND MOVEMENTS

Women's organizations and movements have demonstrated that GBV is preventable and that, given the chance, they are best placed to turn the tide against it. Despite this, in 2018–19, they received just 1% of bilateral aid allocated to gender equality, in itself a fraction of overall aid.⁸⁰

Governments and other actors should:

- Immediately recognize GBV prevention and response services as essential and eligible for rapid response funding.
- Make proportional multi-year, flexible funding available to feminist movements and organizations working to end GBV and support survivors.
- Include women's and LGBTQIA+ organizations in decision-making spaces, and increase the equal and meaningful representation of women in the planning and delivery of services.
- Work with women's organizations and women human rights defenders to develop measures to increase their safety.

2. TAKE A SYSTEMIC, INTERSECTIONAL AND MULTI-SECTORAL APPROACH AND SCALE UP FUNDING TO TACKLE GBV

Piecemeal, fragmented efforts to address GBV and inequalities will fail to achieve transformative results. Coordinated, comprehensive and cross-sectoral responses are required, to ensure that survivors are able to access effective and quality services.

Governments and other actors should:

- Align national coronavirus response plans with national GBV action plans and international instruments and commitments.
- Take a cross-sectoral approach, strengthening GBV response and prevention across public services and coordinating private sector, public sector and civil society responses.
- Fund and ensure that services, including psychosocial support, sexual and reproductive health and emergency response services, are survivor-centred, comprehensive, quality, and affordable and accessible to diverse women, including trans women, and girls and LGBTQIA+ people, including those located in rural and remote areas.
- Examine the ways in which inequalities and oppressions, such as those related to age, race, disability and sexual orientation, intersect, overlap and compound each other, resulting in unique experiences of violence.
- Invest in large-scale multi-sectoral campaigns to change the social norms and beliefs underpinning GBV, commensurate with other public health campaigns and the scale of the issue.

3. BUILD ECONOMIES THAT STRENGTHEN RESILIENCE TO GBV

How countries structure their economic response and recovery in the face of COVID-19 will either increase or reduce inequality and resilience to GBV. Equally, IFIs like the World Bank Group should address GBV in their investments and, along with the IMF, promote policies that encourage expansion of universal social protection and universal, free, quality public services. All forms of work done by women should be recognized and appropriately rewarded, in particular the low-paid and unpaid care work they disproportionately shoulder responsibility for, such as caring for children and sick and elderly people.

Governments and other actors should:

- Ensure that the costs of GBV are not disproportionately shouldered by survivors by mobilizing resources, including through fair taxation, to reduce inequalities and provide accessible, affordable public services.

- Build social protection systems to act as safety nets for those facing violence, extend these to informal workers and unpaid and low-paid carers, and ensure decent incomes for the poorest women, including trans women, and girls and LGBTQIA+ people.
- Institute gender responsive budgeting to promote gender justice, a more balanced distribution of resources, and redistributive measures that close gender gaps and counter the economic effects of discrimination.
- Address violence and exploitation directed against women in the lowest paid, most precarious forms of work, including by supporting their right to join unions.
- Scale up debt cancellation to encourage expansion of social protection and public services.

4. COLLECT MORE AND BETTER DATA

Governments and institutions count what they deem important, and gender data collection has been chronically underfunded.⁸¹ Since the start of the COVID-19 pandemic, the lack of quality data, disaggregated by gender, race, age and other relevant characteristics, has hindered efforts to respond to the needs of those hardest hit by the compounding crises.

Governments and other actors should:

- Mainstream gender into national statistical strategies and prioritize it in regular data collection processes.
- Ensure greater investments in national statistical capacity to collect and analyse gender data.
- Ensure that all data is disaggregated by gender and other relevant characteristics, including race, age, sexual orientation and disability, to allow for intersectional analysis and action.
- Collaborate with women’s rights organizations to develop data collection instruments and analysis reflective of diverse gender realities.



A young woman follows a literacy class at the Women’s Home in Bria, in the heart of the Central African Republic, which offers education to survivors of violence. © Aurélie Godet/Oxfam

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