VIOLENCE AGAINST WOMEN (VAW) IN THE CONTEXT OF COVID-19
LESSONS AND TOOLS FOR LATIN AMERICA AND THE CARIBBEAN

Evidence from previous emergencies (health crisis and natural disasters), as well as data from countries that have been fighting COVID-19 for several weeks, suggest that violence against women (VAW) is likely to increase in Latin America and the Caribbean over the coming weeks and months. New Zealand saw a 53 percent increase of VAW cases in the wake of a major earthquake and the United States registered nearly double the amount of cases in the wake of Hurricane Katrina. Moreover, data from China documented three times the number of police reports during the COVID-19 lockdown period than during the same period the previous year. COVID-19 exacerbates VAW due to confinement, isolation, economic stress, and anxiety. Additionally, the implementation of social distancing measures by governments—lockdowns, mobility restrictions, and closure of spaces that congregates groups of people—force government agencies and civil society organizations to reduce the supply and adjust the modalities of VAW services.

This note[1] summarizes key actions and lessons to ensure VAW service delivery can continue operating and respond to the evolving needs in emergency contexts. It also connects readers to available resources and tools. It builds on experiences, lessons learned, tools and evidence from past crises, as well as on innovative practices put in place by organizations to prevent, respond and reduce VAW.[2] The actions have been organized in three categories: 1) **Reduce and Mitigate Risks:** recommends preventive measure to lessen risks; 2) **Promote Resilience through Effective Service Delivery:** provides concrete actions to ensure quality and effective services continuity during the crisis; and 3) **Aid Recovery and Preparedness for Future Disasters:** offers considerations to prepare for the post-crisis scenario.

ACTIONS, LESSONS AND TOOLS

REDUCE AND MITIGATE RISKS

ACTIONS	LESSONS	EXAMPLES OF ACTIONS AND TOOLS AVAILABLE[3]
Raise awareness of the increased risks of VAW	**Use technology and mass communications** to raise awareness of VAW and to inform the population about service continuity and changes in the context of the COVID-19 outbreak. Use **different means of communication** to reach different audiences, e.g. vulnerable groups, persons with disabilities, rural women, or the elderly. Rural women and the elderly may not have access to technology like smartphones or computers, therefore, traditional media (radio and TV) might be more effective at reaching them. **Offer information on healthy conflict resolution**, healthy parenting, managing stress and anger in positive ways. Provide recommendations and tips for men and women on how to reduce anxiety, take advantage of the situation to build stronger and healthier relationships with their partners and children.	**COVID-19: How to Include Marginalized and Vulnerable People in Risk Communication and Community Engagement.** This guideline provides information on key protection and inclusion actions for risk communications and community engagement for violence survivors and other populations at disproportionate risk in public health emergencies. **Spain offers free visual access interpretation** for people with hearing disabilities that need information about VAW through the SVisual platform. It also offers information via texts transcribed in computer screens or cellphones, without intermediaries, through the Telesor platform.
Develop action guidelines for victims and survivors of VAW	**Develop action guides and technology services** for women that are experiencing VAW in the context of the COVID-19 outbreak. Keep in mind that not all digital tools are safe and private for these types of services. **Map and provide information on referral partners** (legal, security, health and social services) accessible via phone or online in order to **connect beneficiaries to these services remotely.**	**Action Guide for Women who are Experiencing Gender-based Violence in a Situation of Permanent Residence Derived from the State of Emergency by COVID-19.** A guide for individuals experiencing VAW, including those that are living or share children with the abuser. Provides information on how to access general and legal services during the COVID-19 crisis.
Update referral pathways to provide integrated services to VAW victims	Update VAW referral pathways to **reflect changes in available care facilities and inform key service providers** and communities about those updated pathways. **Strengthen coordination** across government agencies and service providers.	**Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing risk, promoting resilience and aiding recovery.** Guidelines to assist actors and communities affected by humanitarian emergencies to coordinate, plan, implement, monitor and evaluate essential actions for the prevention and mitigation of VAW across all sectors of humanitarian response.
Involve women in decisions to ensure measures adopted address their needs	Involve **female health care workers and women leaders in decision making and policy spaces** to ensure that responses to COVID-19 outbreaks adequately address the needs of women and girls in each community.	
Involve men to prevent VAW	Provide **live chat counseling, information, and referral services for men** who seek support and guidance to prevent or manage violent behaviors.	Australia has put in place the **Program No to Violence (NTV)** with the objective of working with men to end their violence and abuse towards family members. The program offers in-person and live chat counseling, information, support and referral services. NTV has put in place guidelines and implemented policies to continue service provision during the COVID-19 outbreak.
Create a sense of community to increase people's ability to cope during the crisis and reduce VAW risks	Foster the development of **community networks** and support through communications and positive messages. **Empower the community** with information and resources. Encourage them to reach out to authorities when necessary.	In 2014, the Bay Area Transformative Justice Collective (BATJC) in the US began using the term "pod" to refer to a specific type of relationship between people who would turn to each other for support around violent, harmful and abusive experiences. The BATJC developed a methodology to build pods that could be useful in the context of COVID-19 where **social networks** become extremely important to survive the crisis.

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3. The resources and actions listed here are a menu of available options that policy makers can find useful. They are not a comprehensive list, nor are they all evidence-based interventions.

PROMOTE RESILIENCE THROUGH EFFECTIVE SERVICE DELIVERY

ACTIONS	LESSON	EXAMPLES OF ACTIONS AND TOOLS AVAILABLE
Use technology to maintain services operating when mobility is limited	**Use text messaging, online chat or video calls to offer hotline and crisis services** to increase victims' access to advocacy and support. These channels are particularly useful at times when victims and service staff have limited ability to interact in person. Be aware of the risks and benefits specific to each digital platform. **Provide staff with cellphones and laptops/tablets** so they can work remotely.	**Digital Services Toolkit: Response to the COVID-19 Pandemic.** Includes guides, worksheets, and recorded webinars focused on assessing capacity, choosing a platform and a vendor, and best practices for various types of tools including text, chat, and video. **Guidelines for Mobile and Remote Gender-Based Violence Service Delivery.** Provides guidance on establishing VAW mobile and remote services, in order to provide case management, psychosocial support, and referrals to meet the immediate needs of survivors.
Build staff capacity to provide remote services	Use existing guidelines and toolkits to build capacity of VAW hotline, shelters and crisis services staff to **manage services remotely**. The **resources need to provide information to staff** on issues such as health protocols in shelters, ethical and effective use of technology, and confidential case management while working remotely.	**Remote-Offered Skills Building Application (Rosa).** Provides key content on VAW knowledge, case management, communication and attitude skills for staff working remotely; offers self or supervisor-administered skills assessments; and a community space for users to expand their learning through facilitated remote discussions and distance supervision. Staff can access contents in settings with low or no connectivity.
Raise awareness among health and other frontline workers on VAW identification and referral	Raise awareness among **all frontline health workers, human services personnel and security forces involved in the crisis** (first responder, doctors, police, pharmacists, etc.) of VAW signs that could be associated with or exacerbated by the pandemic and to whom they can make referrals for further care. Consider placing VAW specialists in health centers.	During the COVID-19 lockdown, victims can go to pharmacies and use the codeword **"Mask-19"** (France and Spain) to inform pharmacy staff that they are suffering VAW. The pharmacy staff will ask a few questions to obtain basic information about the person requesting protection. With this information, pharmacy staff will quickly get in touch with local authorities or the VAW hotline numbers to inform about the case.
Encourage the provision of mental health services to help frontline workers and people cope with the crisis	**Provide mental health services for frontline workers** (VAW services staff, health workers, human services personnel, etc.), **as well as men and women in general.** Putting in place psychological services through hotlines and other platforms can help people cope with the stress and anxiety caused by the pandemic and prevent/reduce violence. Take into consideration the **needs of frontline workers**. Try to provide flexible hours and access to mental health services to help them manage stress.	In the context of COVID-19, the Panamanian Association of Psychologists have put in place a **free virtual Psychological Support Network** to help the population cope with confinement and stress related to the crisis. **Briefing note on addressing mental health and psychosocial aspects of COVID-19 Outbreak.** Summarizes key mental health and psychosocial support considerations for frontline workers related to the COVID-19 outbreak.
Collect data when using remote services to enable proper case management	Consider the use of new technologies to support **safe and confidential data collection during VAW remote service delivery**.	**The Protection Related Information Management System,** and the module within it called Gender-Based Violence Information Management System is a web application that enables to safely collect, store, manage and share data for case management and incident monitoring. It also includes a mobile application to allow frontline staff to safely track VAW incidents and individual survivors' progress. **CommCare** is a mobile data collection platform for survey collection. Deploying this platform allows users to evaluate the services provided through mobile and remote technology-based approaches and the level of client satisfaction. It is also used to support frontline workers with registration forms, checklists, SMS reminders, and multimedia.

AID RECOVERY AND PREPAREDNESS FOR FUTURE DISASTERS

ACTIONS	LESSON	EXAMPLES OF ACTIONS AND TOOLS AVAILABLE
Respond to economic impacts of the pandemic and of social distancing measures to contain it	Develop targeted **women's economic empowerment strategies and extend emergency temporary cash transfers** to women in vulnerable groups, such as victims of violence, to mitigate the impact of the outbreak and its containment measures.	The Governor of the <u>Province of Buenos Aires, in Argentina,</u> authorized the Ministry of Women, Gender Policies and Sexual Diversity to **grant subsidies to support humanitarian contingencies** of extreme gravity and urgency, as well as expenses for VAW victims and their relatives as part of strategies to respond to COVID-19.
Continue provision of mental health services	Attend to individual psycho-social needs by including **services for grief and loss.**	
Integrate gender in emergency preparedness plans	Update emergency preparedness and response plans to ensure they are **grounded in sound gender analyses**, ensuring that mitigation and response measures address women's and girls' heightened VAW risks.	
Fund research	Devote more resources toward **researching the gendered implications of public health emergencies**, so that future public health preparedness and response plans can mitigate harm to women, girls, and other vulnerable groups.	

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