THE FEMINIST HUMANITARIAN NETWORK

WOMEN'S HUMANITARIAN VOICES:
Covid-19 through a feminist lens

A GLOBAL REPORT
2020, and to date, 2021, was and is uniquely challenging for the majority of the world’s population as the Covid-19 pandemic reshaped how we live, work, and engage with our communities. The pandemic made painfully clear – and in many cases deepened – the inequalities that have long existed in our societies; perhaps no inequality was thrown into such sharp relief as gender inequality. In the second half of 2020, members of the Feminist Humanitarian Network (FHN) undertook research in eight countries – Bangladesh, Kenya, Lebanon, Liberia, Nepal, Nigeria, Palestine, and South Africa – to understand the impact of the pandemic in humanitarian contexts.

As documented in this report, the work and leadership of women’s rights organisations (WROs) often go unrecognised, in part because they do not have access to the resources to showcase their achievements, their innovative approaches, and their ideas. This report aims to ensure that the significant and essential accomplishments of WROs, achieved despite major systemic challenges and barriers, are visible and clearly documented.

The research investigated how WROs and the communities they work with have been impacted by the Covid-19 pandemic and the humanitarian response to it, and how WROs’ work has changed and impacted humanitarian response. In many of the countries that research was undertaken in, Covid-19 struck against a background of ongoing crises and WROs have led responses, navigating the additional pressures that Covid-19 has layered on existing challenges. Gender-based violence (GBV), which increased significantly due to Covid-19, remains a critical issue and WROs play a key role in responding to it.

Many of the findings are distressing, such as accounts of increased violence, decreasing economic opportunities, increasing poverty, and clear de-prioritisation of women’s
rights and lives in humanitarian planning, implementation, monitoring, evaluation, and learning. And despite findings that WROs play a key role, the research also shows that they were excluded from decision-making processes and funding, which undermines their leadership and impacts their capacity to address the critical issues facing women and girls. In six of the eight countries that formed part of the research, WROs did not have access to donor funding, due largely to excessive and exclusionary due diligence, application, and reporting requirements. Where WROs have had donor funding, donors continue to determine how WROs are funded and what they receive funding for, relegating WROs to the role of ‘implementing partner’, often to the detriment of the women in the communities they work with.

WROs were also largely excluded from formal decision-making spaces in Covid-19, and their contributions to decision-making bodies ignored. WROs have, in some contexts been excluded on punitive grounds, or sidelined due to prevalent patriarchal attitudes held by male-dominated organisations or bodies.

This report brings together learnings from the research, detailed further in eight individual country reports. For feminist humanitarians, some of the findings will be unsurprising: WROs have been at the forefront of responses to Covid-19 in communities; they have taken an intersectional approach; and they have been committed to leaving nobody behind. FHN members found that many WROs are representative of women who are considered ‘marginalised’, such as women with disabilities, indigenous women, and LGBTQIA+ women, and have been active in ensuring and advocating for their inclusion in humanitarian response.

While the research explored questions about the challenges WROs have encountered during Covid-19 specifically, many of the findings indicate systemic challenges that are presented by the humanitarian system at large and are relevant to crises beyond the pandemic. The research also showcases the feminist and alternative solutions that WROs have used to respond to Covid-19, despite all the challenges and limitations they faced. What is clear is that WROs did what they have always done – persevered. They have played a critical role in the Covid-19 response and worked in creative and feminist ways to ensure their work is powerful and sustainable for the women and girls they serve. Below are the learnings and recommendations of WROs – to the international humanitarian community, governments, international non-governmental organisations (INGOs) and their fellow WROs – who have continued to support those they work with despite tremendous odds.

FHN member in Bangladesh, Badabon Sangho, runs Covid-19 awareness sessions.

The Feminist Humanitarian Network (FHN) is a global network of women leaders working together to transform the humanitarian system into one that is guided by feminist principles. The FHN was established by feminists working in humanitarian action that recognised the deeply patriarchal and colonial ways in which the humanitarian system works, and the need for system change to ensure the agency and amplify the voices of women in emergencies.

The FHN is a member-based network of grassroots, local, and national WROs working in the Global South; regional networks; international NGOs; and individuals. 70% of the FHN’s organisational members are WROs – INGO membership is limited to 30%.
At its outset, WRO members of the FHN recognised the opportunity the Covid-19 crisis presented to collectively document the essential and strategic frontline role that WROs play in crises, as well as the challenges they face as part of the humanitarian system.

The organisations that led the research are all women-led women’s rights organisations working at the grassroots, local, and national levels in eight countries – Bangladesh, Kenya, Lebanon, Liberia, Nepal, Nigeria, Palestine, and South Africa – in the Global South. Each organisation has a feminist approach and works to advance women’s rights and gender equality. Several of the organisations included have a specialised focus, such as maternal and newborn child health (MNCH), sexual and reproductive health rights (SRHR), and women’s right to education.

The organisations that participated in this study define themselves in different terms, including women’s rights organisations, organisations for the protection of the disabled, community-based organisations, civil-society organisations, feminist organisations, local NGOs, grassroots organisations, and similar. Like the leading organisations, many of the participating organisations have a specialised focus. Each works at the grassroots, local, or national level.

This report has been collated from a series of national reports produced by FHN members in each of the eight countries the research was carried out in. In line with the FHN’s feminist approach, each national report is slightly different: reports reflect the different approaches of different organisations, the different contexts they have been produced in and for, and the different leadership and communications styles of WROs.

In the collation of this global report from the national reports produced by WROs, the authors have endeavoured to share the specific experiences and voices of as many organisations as possible. Findings included in the global report have been validated through a series of sessions with the organisations leading the research.

For the purposes of this report, the term ‘WRO’ has been used to refer to organisations as a primary term, as most organisations that were included in the research are women’s rights organisations and women-led organisations, or organisations with a strong focus on gender equality and women’s rights in their work. However, the terms individual responding agencies have used to refer to themselves have been retained throughout.

### A FEMINIST HUMANITARIAN SYSTEM

**The FHN defines the term ‘feminist’ to mean:**

- Being intersectional, inclusive, holistic, collaborative, and committed. Putting all self-identifying women at the centre.
- Ensuring women’s dignity, driving transformation, dismantling patriarchy, and challenging exclusion.
- Leaving no-one behind, ensuring safety and safe spaces, and accountability and transparency.
- Recognising power dynamics and taking action to address them, to shift power where necessary, and always using power responsibly.
- Being self-reflective, and open to adapting and changing, to ensure feminist principles are consistently upheld.
- Working together as a movement for women’s rights, for human rights, and justice for all.
THE FHN'S VISION OF A FEMINIST HUMANITARIAN SYSTEM IS ONE THAT:

- Is collectively and unwaveringly committed to achieving gender equality, recognising and responding to the systemic drivers of inequality, and using emergencies as catalysts to advance women and girls' rights.

- Acknowledges the patriarchal and colonial dynamics within itself, that often exclude or downplay the contribution of those identifying as women and minorities, particularly those from the Global South.

- Takes responsibility for identifying unjust formal and informal power relations within itself by regularly critiquing the extent to which its structures and processes reinforce patriarchal power relations through humanitarian action.

- Ensures that the power of women-led organisations working in the Global South is not undermined by ensuring that they are resourced and consistently included, and that they leadership is recognised and made central in shaping the humanitarian system.

- Recognises that there is no one-size-fits-all approach, thereby ensuring that nobody is left behind.

- Facilitates safe spaces through its coordination mechanisms, where actors working at all levels can be heard, and the expertise of diverse responders, including those identifying as women, is looked up to.

At a practical level this means that in humanitarian action, WROs play a leadership role, serving the diverse and marginalised populations who trust them, are accountable to the populations they serve, are properly resourced, with donors responding to what WROs determine are programming priorities, advocate for structural change towards gender equality as an aspect of crisis response, and lead in the design of a future, feminist humanitarian architecture.

It means that donors supply funding to WROs in a way that gives WROs agency to determine their communities' priorities and act on them. It means that INGOs and UN agencies take responsibility for identifying and working with WROs, including those that operate from an intersectional perspective or serve a marginalised population (LGBTQIA+ communities or persons with disabilities, for example), to ensure they are at the forefront of the response. In the response stage, INGOs and UN agencies do not undermine WRO efforts and play a supportive role to help realise the programming of WROs; commit to bringing WROs to decision-making tables to speak out on how humanitarian response is working; consider their role and recalculate the resources needed to give preference to local actors and WROs; reflect on and address unfair due-diligence processes and acknowledge the different modalities in different contexts; and work on a system of fair accountability and respect of partners in the Global South.
Key questions

This research was undertaken to capture a snapshot of the Covid-19 response as a global example of how the humanitarian system functions from a feminist perspective. The objective of the research was to document the role of WROs in the Covid-19 response, to identify and document the specific challenges presented to WROs in the response by the humanitarian system, and the feminist ways of working and solutions to challenges that WROs have developed.

This report addresses the following key questions:

- What impacts did Covid-19 have on the women and communities that WROs worked with?
- How did WROs respond to the Covid-19 crisis?
- What challenges did the humanitarian system present for WROs in the Covid-19 crisis?
- What solutions (particularly feminist solutions) did WROs develop to overcome these challenges during Covid-19?

Methodology

Research in the eight countries has been led and undertaken by a total of 17 WRO members of the FHN, who came together at its outset to develop and agree on the concept and approach for the research.

The organisations that led the research:

- Pastoralist Girls Initiative (Kenya)
- Sawa (Palestine)
- Lebanon Family Planning Association for Development and Family Empowerment (Lebanon)
- Palestinian Women’s Humanitarian Organisation (Lebanon)
- Community Healthcare Initiative (Liberia)
- Kids Educational Engagement Project (Liberia)
- Organisation for Women and Children (Liberia)
- Paramount Young Women Initiative (Liberia)
- Women in Humanitarian Response in Nigeria Initiative Network (Nigeria)
- Network of Disabled Women (Nigeria)
- Women’s Right to Education Programme (Nigeria)
- Gender and Community Empowerment Initiative (Nigeria)
- Life at Best Development Initiative (Nigeria)
- Tewa (Nepal)
- Gyanbodh Research and Development Services (Nepal)
- Badabon Sangho (Bangladesh)
- The Living University (South Africa)
The research approach has been feminist, with WROs defining questions and leading the research itself, with coordinating and administrative support – as defined by the leading WROs – provided by the FHN Secretariat and INGO FHN members. Decisions about the concept and about the direction of the project were made collectively by WROs, who applied a reflective approach, coming together throughout the research cycle to reflect on progress and opportunities to learn and adapt. WROs were sure to include the voices of women and organisations experiencing marginalisation, such as organisations representing women with disabilities, and women belonging to ethnic minorities. In most contexts, semi-structured interviews were used to ensure that the issues that were highlighted by each respondent were the issues they determined to be important, rather than the researcher.

An example of the support provided by the FHN’s INGO members was that provided by ActionAid, who applied its Feminist Research Guidelines (FGDs) in developing a set of tools and templates under the guidance of WRO members. The FGDs were also used to support the FHN in conversations on the research cycle, intersectional feminist approaches to data collection and analysis, research ethics, and safeguarding data collection.

Using these tools, FHN member organisations gathered inputs from consultations and interviews from the experiences and agency of a range of local actors in their regions. The body of evidence is therefore collated from 226 respondents within these eight countries.

FHN member organisations leading the research determined the number of participating organisations in each country. The number of participating organisations varied based on FHN members availability to lead research in each country. For instance, in some countries (such as Liberia and Nigeria) 40-70 community-based/grassroots women’s rights organisations were included as participants, as in each of these countries, the research was led by four FHN members collectively; in other countries (such as Palestine and Bangladesh), the research was led by a single FHN member and therefore the number of participating organisations in those countries was fewer (8 – 14).

The methodology that was used was qualitative; this decision was made by the leading organisations collectively when the research concept was conceived. The methodology used varied slightly from country to country, and was determined, in part, by the impacts of Covid-19 in each context. Every organisation conducting research included in-depth interviews as a primary methodology. However, some lead organisations chose to conduct in-person focus group discussions (FGDs) and semi-structured key information interviews (KIIs), while others limited their interactions with respondents to online interviews.
KEY FINDINGS

As in any crisis, the Covid-19 pandemic has exacerbated existing gender inequalities and has disproportionately affected women and girls and their communities. Whilst there are recurring themes across contexts, they manifest differently depending on a range of context-specific factors and intersecting elements of identities, such as sexual orientation, gender identity, age, religion, and race.

At the same time, the humanitarian response to the crisis has excluded and undermined women’s rights organisations (WROs), women-led organisations, representative organisations (such as organisations of women with disabilities) and organisations working at community and national levels with a focus on women’s rights and gender equality. These organisations play a critical role in ensuring that women, in all of their diversity, have their needs met and their rights upheld – both in humanitarian crises and outside of them. The humanitarian system’s sidelining of organisations in the Global South representing and working alongside women has immediate impacts in a crisis and long-term impacts on the work of those organisations in advancing and protecting women’s rights.

The recommendations – including that women and women-led organisations must not be sidelined – are steps that can be taken immediately to shift the global humanitarian system towards being a feminist humanitarian system – a system that is responsive, accountable, and accessible to women and their organisations. A detailed description of what the FHN means by a feminist humanitarian system can be found in page 3.

WROs as Covid-19 responders

In every country that research was carried out in, WROs distributed preventative supplies such as handwashing gels, soaps, sanitisers, and face masks. WROs used community-awareness raising activities (e.g. door-to-door distribution of flyers and training sessions, both online and in person when it was safe) as well as mass media (such as radio programs) to ensure communities were informed on Covid-19 guidelines and prevention. WROs provided wash stations and water tanks in strategic locations and distributed hygiene kits to ensure that women had ongoing access to sanitary items, which were, in many cases, missing from government-led and centralised relief distributions.

In Nigeria, it was reported that the greatest strength of WROs has been their “close connection with communities”. This close connection of WROs and communities, which was evident in every country, meant that they were uniquely equipped to take actions to prevent Covid-19 and to run awareness-raising activities, based on the trust implicit in their existing relationships.

While many WROs took responsibility for carrying out activities to prevent the spread of Covid-19 and to ensure that women and marginalised groups were included in protective measures, WROs also experienced and responded to ‘knock-on’ impacts of the Covid-19 crisis, leading efforts to respond to GBV, and ensuring ongoing access to livelihoods, economic security and other critical services.

This body of evidence highlights the voices and experiences of women at the frontlines, who have collaborated to showcase their achievements in the Covid-19 response. Communities, clients of WROs, and WROs themselves were impacted by Covid-19. In each section, the challenges experienced by women and WROs are summarised, followed by feminist solutions they have established to respond to the unprecedented nature of Covid-19. Key recommendations for local, national, and international actors are also included in each section to suggest ways to adapt their approaches and ensure the needs of women and girls are responded to in crises.
Gender equality was impacted negatively as tense social relations resulted in increases in intimate partner violence. Additionally, women who were already working in precarious informal jobs lost income and jobs while those who are essential workers found themselves at the frontline of exposure. Additionally, working women found it difficult to work from home due to the increased double shift of having to care for children while trying to work remotely as schools and day care centers were closed.”

WRO respondent in Kenya

Gender-based violence

In each of the eight countries where FHN members led research, WROs reported an alarming increase of GBV throughout Covid-19. WROs reported that the scale and the intensity of violence against women (including emotional, physical, sexual, and economic violence) had increased significantly, and that lockdown restrictions made responding to the ‘shadow pandemic’ difficult. GBV response has been high on the agenda of WROs, many of whom anticipated increased levels of violence at the very outset of the pandemic, and have played a primary role in leading the response to gender injustice throughout the crisis.

In Lebanon, one organisation stated that, based on its own research, “reported violence against women had increased by 60 percent and against children by 30 percent in 2020 from 2019.” A WRO in Palestine highlighted the gravity of some of these violent acts: “Violence has become [more] vicious. There are more than just the cases of light hitting. There is use of heavy objects. There are broken bones and hitting with metal rods.”

Respondents in South Africa described women as being subject to ongoing GBV, including rape, that often goes without being acknowledged or addressed by authorities and in many cases, community members.

They reported that Covid-19 has worsened the situation considerably. In Bangladesh, it was reported that food and financial support had been withheld from women. It was also reported in Bangladesh that during Covid-19 was the first time that some women had experienced this violence.

Lockdowns have forced women into close proximity with perpetrators, with limited respite. Lockdowns have prevented women from accessing support and services such as helplines and shelters which they would otherwise have access to, due to being at home with perpetrators or governmental facilities being closed during lockdown.

One WRO director in Palestine said: “These men stayed in their face 24 hours. If a problem happens, they cannot reach us.”

Similarly, a respondent in Bangladesh said: “So, imagine being stuck with your abuser 24/7, who is used to taking women as bait to relieve his nervous system, and this pandemic just gave them a better chance of doing the same.”

In Bangladesh, child, early and forced marriages have increased in remote areas, where poverty-stricken families have used this as a mechanism to ease financial burdens caused by the crisis. Respondents in Bangladesh reported that at the same time as this practise increased, law enforcement agencies and local administrators have been busy dealing with Covid-19, which has meant that this issue has not been responded to.

Respondents across a number of countries reported that institutional/government-run support (in terms of coordination and the provision of services) is insufficient and poorly coordinated outside of times of crisis, and highlighted that Covid-19 has exacerbated this. This was alongside the closure of state-run services in several countries, and the diversion of funding for GBV by local governments that WROs reported led to a delay in reporting and responding to GBV cases and aggravated the shadow pandemic significantly.
MENTAL HEALTH

WROs in Nepal and Palestine reported an increase in suicide and suicidal tendencies amongst women. In Palestine, self-harm increased drastically for women, with a 466% increase since 2019 (or six times higher than in pre-Covid-19 times).6

Many of the respondents in South Africa work in rural areas and said that there are no resources for women to escape in rural and semi-rural areas – shelters are too far away and costly to get to, and there are no crisis centres. Respondents in South Africa said that where services do exist, they are “restrictively under resourced and hence not adequate.” It is women and their organisations that provide psychosocial support and safe havens – however during Covid-19, social distancing and other measures have severely limited the number of people that can access these spaces.

WROs’ response - Gender-based violence

WROs in each of the eight countries have seen GBV as a key and urgent issue in the Covid-19 crisis, and have taken responsibility for responding to it, recognising critical gaps in the system. Responses have included: facilitating reporting; identifying and responding to cases of violence; advocacy; the provision of helplines and alternative communication systems tailored specifically to lockdown circumstances; protection services (including legal support), and the provision of shelter and safe spaces.

WROs played a key role in ensuring ongoing access to services during lockdowns by developing alternative methods for women to seek support. They adapted their programs to include collective advocacy amongst women’s groups and to hold local authorities to account in upholding their responsibilities of preventing and responding to cases of GBV.

For example, one WRO in Palestine developed a WhatsApp messaging system to ensure that women could continue to reach helplines without having to make a call while their perpetrator was present in the home. This organisation said: “we discovered that during confinement, during the closure, women were unable to call us because everybody was in the house. Calls from females went down for a certain time, but when we introduced our WhatsApp chat counselling, women began contacting us much more.”

In Kenya, organisations shifted their face-to-face services to virtual means, such as tele-counselling, ensuring access to justice through virtual court representation for survivors of GBV, and conducting virtual assessments to determine how best to support survivors. This too was the case in Lebanon, where respondents reported that organisations provided specific training for their social workers and psychosocial support staff to work effectively online.
In Liberia, WROs conducted training on advocacy, lobbying, and influencing for WROs to support social change and equip them to respond to increased levels of GBV. One organisation launched an online data collection app to monitor and track issues associated with rape and GBV cases. The platform was shared by communities and respective police depots.

Respondents noted the critical role that WROs have played alongside other actors in responding to GBV during Covid-19 – that they partner with and train local officials in how to respond to GBV, and that they ensure that women and their communities are aware of official reporting mechanisms. The role that WROs play within the humanitarian system is essential for the humanitarian system to respond effectively to GBV – a role that cannot be understated and must be recognised and supported.

**CASE STUDY**

Organisations in South Africa are providing safe spaces for women to challenge GBV. The approach that is being taken by a number of the respondent organisations in South Africa is holistic: they are providing immediate shelter and protection through the provision of physical safe spaces, psychosocial support, activities to support long term healing and to equip women with the skills to become change agents in their communities to overcome systemic gender injustices, including GBV. One respondent organisation that provides space for survivors of sexual trafficking to live and to heal said that, while using a holistic approach limits the number of women that are able to access the service (12 at a time), their rehabilitation will be comprehensive and the women will be active agents of change when they leave: “The importance of this kind of program, despite it not having a broad reach, must be recognised and supported.”

**Recommendations:**

1. All actors must recognise that the existing, ongoing global pandemic of violence against women and girls has been exacerbated by Covid-19 and take urgent and effective action by:

   * Allocating adequate resources to address GBV.
   * Including WROs in response and recovering planning and execution of response and recovery plans as leaders, both within the humanitarian system and through governments and other duty bearers.
   * Recognising all forms of violence against women and girls, including increasing child, early and forced marriage, and ensure long-term support for survivors of all forms of GBV.

2. International actors must immediately stand behind WROs to put pressure on governments to implement existing laws to prevent and respond to violence against women and girls and, where necessary to pass laws that help protect women and girls from violence, including in times of crisis, and to work with WROs in their drafting. Legal frameworks are critical in protecting women and girls in times of crisis. International actors must recognise this and include this pressure in the action they take to respond to emergencies.

3. International and national actors must prioritise humanitarian interventions that are gender-transformative and focus on the needs and concerns of women and girls, (specifically in preventing and responding to GBV). This must include funding and ensuring the sustainability of safe spaces for women as defined by the women themselves, and providing services that ensure physical, emotional and mental health.
Livelihoods and access to critical services

In each of the eight countries, WROs reported that Covid-19 and the imposed restrictions had significant impacts on communities, including extreme poverty and loss of livelihoods, which was experienced disproportionately by women and marginalised groups.

WROs in several countries reported concerns about the long-term, gendered impacts of Covid-19 on a full range of critical services. It was reported in a number of countries that throughout Covid-19 poverty has increased to such an extent that households have not been able to afford the basic necessities, including food, and in some contexts, such as Palestine, that this level of poverty and hunger had not been experienced previously. These impacts, as well as detrimental impacts on mental health, increased domestic violence, and missed education will have long-term, gendered repercussions.

Respondents in Lebanon reported that these issues precipitate the use of negative coping mechanisms, such as reduced food consumption, selling of assets, child labour, and early marriage – all with potential generational impacts.

In Bangladesh, where 91.8% of women are employed in the informal sector the livelihoods of women have been significantly impacted. Domestic workers, daily labourers, street vendors, cleaners, sex workers, women migrant workers and other informal workers lost their means to earn an income. Women report both huge job losses for female workers in the ready-made garment sector, and where garment factories have re-opened, safety measures are not being enforced and working conditions remain unsafe.

CASE STUDY

One WRO respondent in Bangladesh reported that vulnerable women landowners had been pressured to sell their land at a low price; in many cases, this land is their only asset. Amid Covid-19, land brokers sought to expand investment, using the poverty heightened by Covid-19 to pressure women to sell their land.

A WRO in Palestine said: “A lot of women in the non-public sector have ended their work contracts and stopped working. Now you have an increase in the unemployment among women..., especially, as we said, in the private sector. In addition, women working in childcare have lost their work and women working on smaller projects have lost their jobs. They cannot sell their products anymore. And many small projects have closed up.”

In Kenya, respondents reported that as infection rates increased, there reached a time when the health facilities could not cope with admission needs, and women were forced to care for patients in the home.

“[Covid] has reinforced poverty and widened the power imbalance which leads to suppression and oppression of women, as well as exploitation and increased vulnerability of the woman and the girl child.”

WRO respondent in Nigeria
COVID-19: IMPACTS ON WOMEN AND MARGINALISED GROUPS

WROs noted that women who are considered ‘marginalised’ due to multiple elements of their identities (for example, being women with disabilities, Bedouin women, women sex workers, Harijan women, indigenous women, and survivors of GBV) faced greater impacts from Covid-19. This was due to systemic exclusion from the response and active discrimination.

In Nigeria, women with hearing and sight impairments could not access information about the response, restrictions, and alternative services; respondents shared that pregnant women have even lost their pregnancies as a result of this lack of access to services. Exclusion from the response for women with disabilities meant that a number went without access to their basic needs, such as food, and experienced significant psychological impacts.

In Bangladesh, women working in hospitals, many of whom are Harijan7 women, and women returnee migrant workers, experienced hate speech and discrimination as they were perceived to be carriers of the virus. A respondent organisation representing Harijan women said: “Amid the Harijan community, women are the most deprived. There are pregnant women, women with babies. But they are doing the job of cleaning. Amid Covid-19...There was no safety for them. Many of us got infected and died.”

WROs’ response - Livelihoods and access to critical services

Across many countries, WROs reported having stepped up to ensure that critical services that had been closed, reduced, or made less accessible during lockdowns were still accessible to women, by offering alternative services or increasing their own service provision, modified to ensure Covid-safe practices.

In Liberia, one organisation launched a program designed to keep children learning when the Liberian government closed schools and other public institutions by supporting cost-free digital learning. When the Ministry of Education in Liberia launched the ‘Teach by Radio’ program to broadcast educational programs, guiding parents, teachers, and students through radio-based activities, most WROs mobilised resources to procure radio phones (mobile phones with radio access) to girls in low-income communities.

In response to hospital closures and reduced services, a collaborative group of WROs in Liberia organised the Pregnant Women Care Package Drive to help identify women with due dates during the lockdown, providing education on how to access health practitioners during curfew hours, and distributing care packages.

“The Covid-19 restrictions and the effects of the emergency situation on women are different, but there was no awareness. What would happen to women’s reproductive health, pregnant women, women who needed vaccinations for their children. Some women needed counselling services...some had files in court, some are undertaking procedures in court ...some are entitled to alimony, but there is no way to investigate whether the husband is paying the spousal and child support...”

WRO in Palestine
In Lebanon, rather than requiring medical patients and pregnant women to visit a health centre for a check-up, local NGOs organised safe home visits. Organisations supporting persons with disabilities delivered assistive devices to household so that treatment could continue at home and individuals did not have to invest in assistive devices.

**CASE STUDY**

WROs in Liberia also provided zero interest loans or other access to cash programs for vulnerable women affected by the economic impacts of Covid-19, and launched a project called CoCash Action to support women-headed households to safely access food and other basic needs during the pandemic. Similarly, WROs in Nigeria distributed cash to women, and provided training on livelihoods activities. Organisations in Bangladesh also provided livelihoods support to resume income-generating activities through sharecropping and organic farming.

In some countries, WROs combined Covid-19 direct response with livelihood activities for women impacted by the crisis by establishing and leading the production of PPE. In Nigeria, one WRO opened a livelihoods centre where they employed women to sew face masks and menstrual pads using local fabrics, and also produce liquid soap. In Liberia, several WROs engaged women tailoring unions to create face masks from Ankara fabrics and distributed them to vulnerable communities.

**Recommendations:**

1. National and local governments must ensure that service provision that protects women’s rights and supports livelihoods and economic opportunities is inclusive, recognising that rural areas are often the most disadvantaged, and that standardised methods of distributing livelihood support and assistance sideline women with disabilities and other marginalised groups.

2. National and local governments must work with WROs to design humanitarian response schemes and stimulus packages to ensure that the distribution mechanisms are just and include access to financial support, capital, and supplies that are most critical to women and girls.

3. Donors and national and local governments must ensure funding for services that protect women’s rights is not diverted in times of crisis, including maternal and newborn child health and legal services.

4. National governments must, in the case of further lock downs, work with WROs to designate essential services that must stay open and/or ensure access to specific services through adapted means and ensure that majority-female jobs are not ignored from those considered essential.

5. International actors and national and local governments must work with WROs to distribute cash directly to women when it is safe to do so using methods that ensure women are protected.

FHN member in Nepal, Women for Human Rights - Single Women’s Group, runs relief distributions to single women and waste workers.
Compounding crises

Just as life did not stop for individuals because of Covid-19 – women still get pregnant, children still need an education, everyone still needs to eat – geopolitical dynamics and conflicts did not take a break in 2020 and 2021. In fact, in several countries where FHN research was conducted, Covid-19 struck against a background of ongoing crisis, aggravating existing issues and deepening gender inequalities.

Difficulties in accessing information and relief distributions has been a key issue for women in conflict-affected contexts, where often, additional regulations and processes are in place that WROs must adhere to in order to work with communities.

In Bangladesh, WROs in Chittagong Hill Tracts (CHT), a militarised post-conflict zone, faced extra challenges due to the separate procedures and policies in place in this area. In CHT, CSOs and WROs must go through three extra steps for written approval to access communities and provide support to those in need. In light of Covid-19, most of the officials were absent, meaning any humanitarian project took six to seven months to get approved. As a result, many communities in CHT received no support.

In several countries, the research highlighted that Covid-19 has compounding impacts and increased security risks of the most vulnerable and marginalised populations that live in conflict-affected communities.

In Palestine, Covid-19 struck amidst ongoing humanitarian crises that have been triggered by the military occupation and the volatile security and political situation in the Middle East that have left devastation, insecurity, and instability. One WRO respondent in Palestine noted that the occupational practises have intensified during Covid-19.

In Lebanon, which hosts the largest number of refugees in the world per capita,⁸ the ongoing economic crisis has left vulnerable populations, including refugees, with little money for food, let alone face masks, hand sanitiser and cleaning products. Communities experiencing marginalisation, such as those displaced in the Palestinian refugee camps and Syrian settlements, live in overcrowded conditions, where it is particularly difficult to adhere to the necessary social-distancing precautions to safe keep from Covid-19 and protect their lives.

CASE STUDY

In South Africa, respondents described gender-based violence as a humanitarian crisis in itself – a “war on women”. Before the pandemic, it was estimated that South African women are five times more likely to be killed by GBV than other women worldwide. This is not formally defined by the humanitarian system as a humanitarian crisis, but respondents in South Africa are clear that it must be recognised as such. Respondents also point to crime and human trafficking as being crises in the country that “many do not acknowledge or understand the extent of.”

The challenge of funding and how it is channelled in countries responding to multiple crises including Covid-19, was highlighted in the reports. Humanitarian crises that are extensive and urgent are prioritised, which has meant, during Covid-19, that WROs responding to Covid-19 outside of these emergencies in the same country have less access to funding.

In Lebanon, where respondents regard the country to be in a state of ongoing crisis, the impact of funding for long-term, development activities being diverted to humanitarian activities was reported to be problematic. Similarly, banks in Lebanon have restricted how much money can be withdrawn from accounts and local organisations face difficulties in receiving and accessing donor funds in their bank accounts. One organisation reported that it was unable to pay its staff for seven months although the staff continued to work through this period.
Covid-19 including health precautions and restrictions with their neighbours via phone calls and social media.

Recommendations:

1. Governments and the international community must acknowledge the critical role WROs play to address the gendered impacts of crisis and:
   - Work closely with WROs to reach at-risk communities, including by funding WROs for this work and ensuring ease of access to hard-to-reach communities.
   - Invest in preparedness for WROs so that they are connected to the humanitarian system, trained on the most up-to-date industry standards, and can scale up their funding and programming quickly in the event of emerging crises.

CASE STUDY

One respondent in Nigeria shared accessibility to funding for WROs across the country is impacted by the fact that the country is coping with multiple crises, including conflict in the northern states of Borno, Adamawa and Yobe. The respondent stated that most humanitarian funding goes to the north east states, which are grappling with conflict and Covid-19. Despite this, WROs in the north east are also underfunded.

WROs’ response – compounding crises

The research findings show that women and their organisations are uniquely positioned to act as first responders during crises, specifically in regions and contexts where crises are layered upon each other. WROs bring skills, networks, and unique relationships with and connections to communities that are under extreme pressure brought about by multiple crises, and they have played this role during Covid-19. The invaluable contextual knowledge that WROs hold within their communities supported an efficient and effective humanitarian response.

In Lebanon, for example, local NGOs assumed responsibility for managing the response to Covid-19 in the refugee camps, where their contextual understanding meant that they were able to coordinate activities to ensure that all parts of the camps were covered and the communities’ needs were met. Some WROs coordinated through existing mechanisms such as the child protection network or women’s protection network present in many camps.

In Bangladesh, WROs respondents highlighted that they had direct access to CHT, the ex-military region, to reach communities and those in need who otherwise would have not been reached by government and international humanitarian response. Through their local representation, they were able to share information about Covid-19 including health precautions and restrictions with their neighbours via phone calls and social media.

FHN member in Bangladesh, Badabon Sangho, runs Covid-19 response activities.
Impacts of Covid-19 on WROs

Leadership, decision-making, and recognition

Entrenched patriarchal norms and practices have been magnified in the Covid-19 response, and the exclusion of women from decision-making spaces and the impacts of this practise have been evident.

Although WROs have been the first responders to Covid-19 within their communities, the research highlighted that most ongoing Covid-19 response plans have not been and are not responsive to the gendered impacts of the pandemic due to the lack of representation of women and their organisations in formal emergency response plans and programme design, resulting in women's needs and priorities of women and girls being deprioritised and often, completely overlooked.

Exclusion from emergency response committees

Formal governing mechanisms and decision-making structures established to manage response and recovery planning have been largely closed off to WROs throughout Covid-19. Where WROs have been able to access emergency response committees, representation remains low and their voices not always recognised or heard.

CASE STUDY

In Nepal, respondents reported that following recent local elections, many village and ward level committees formed, activated and institutionalised, and in line with the requirement to have a minimum of 40.4% women in all levels of government, local governments are compelled to include women. However, respondents reported that these spaces did not call for meaningful engagement as they remained highly politicised and although some WROs who are well-established and well-known in the community, were still excluded from decision-making forums. In many cases, competition exists between political party-led organisations and CSOs.

One respondent in Nepal said:

“Representation for women has been at the mercy of our male counterparts in the districts. In Dhankuta they formed a District level coordination committee for [the] Covid-19 response, but there was not a single woman on the committee. Even when WROs tried to work independently, we were blamed for gathering people and spreading Covid-19. It became a common excuse to keep people indoors and prevent them from questioning the activities of local representatives.”

In Bangladesh, where WROs had access and were members of different humanitarian response committees, they did not have allocated roles and responsibilities in these spaces, and consequently, their voices have not been heard in the committee's decision making, and their inputs to decision-making committees and bodies had little impact. One WRO working with women with disabilities asked the Union Council, who was leading distributions, to include people with disabilities on the list but later heard that, in most cases, people with disabilities continued to receive minimal support.
This exclusion of WROs from emergency committees was a recurrent theme in the country reports which highlighted the extent to which this led to the de-prioritisation of women’s needs.

Respondents in Liberia reported that marginalised groups did not have access to Covid-19 coordination committees and the Liberian government failed to make policy commitments for GBV, sexual and reproductive health services, or women-specific economic spaces. One respondent noted that: “Without women’s equal leadership and participation, Covid-19 responses will be less effective at meeting the needs of women and girls, for example they forgot to add sanitary pads to care packages, despite knowing that quarantine lasted for about 21 days.”

In many contexts, the impact of women and their organisations being excluded from decision-making has undermined the leadership women are taking in the response. Responses have targeted men and equipped them with additional decision-making power in their families and their communities, which has meant in some cases that women have not had their needs met at all.

In Nigeria, one respondent said the exclusion of WROs in decision-making led to inequality in the distribution of Covid-19 medical relief: “Female headed households did not benefit from the aid because materials were given only to men for their families even when it is women leaders that distributed at the community levels. Petty traders and other vulnerable populations were not considered in the distribution. The Ministry of Women Affairs was excluded from the distribution process.” Respondents in Nigeria also shared that aid did not reach women with disabilities because many could not access the locations where aid was being distributed due to their disability, as some roads were inaccessible.

Access to information

WROs reported that they have been excluded, in some countries, entirely, from information sharing on decision-making processes, on the response, and on funding opportunities. WROs’ lack of access to information throughout Covid-19 has been a key barrier to their participation in decision-making processes and in their ability to participate in funding calls when they are announced.

Respondents in Nigeria reported this as being a key impediment. One respondent said: “Lack of information sharing has limited our full and effective participation in key decisions at national and local levels.”

Respondents in Nepal echoed this, saying that having access to information would enable them to participate in decision-making spaces, but emphasised that information is limited, in part due to recent local level elections which mean that policies are either being developed or have only just been formed.

Active/punitive exclusion of WROs

In several countries, WROs reported having been actively excluded from decision-making spaces. In some instances, this was due to their political work and advocacy to ensure that the issues experienced by women – particularly GBV – were recognised and effectively responded to by duty bearers. In others, WROs reported that being representative of women experiencing marginalisation led to their active exclusion.

“As we know, also during the emergency period and the lockdown restrictions, there has been a lot of aggression against women, and also aggression and campaigns against women’s organisations and rights organisations.”

WRO respondent in Palestine
In Liberia, WROs reported that WROs had been sidelined by national government due to their participation in protests carried out requesting justice for rape victims in August 2020. As WRO put it: “The organising CBOs didn’t get invited to the National Road Map on SGBV Conference” – a conference that was held during the Covid-19 crisis.

One respondent in South Africa reported that refusing to engage with political agendas has resulted in the organisation being denied practical access to communities by some local leaders or officials.

In Nigeria, organisations of people with disabilities had been excluded from decision-making spaces and were not able to access discussions. One respondent said: “many organisations do not like to work with disabled people’s organisations, so we were not included in the Covid-19 response at all levels.”

**CASE STUDY**

In Bangladesh, respondents reported that WROs are discriminated against by big national NGOs. They also shared that in some networks and forums, there is still a patriarchal attitude – male leaders and members refuse to accept women’s leadership in district or local level networking. One respondent mentioned although her organisation is the biggest in the district, she never gained membership to the Association of Development Agencies in Bangladesh (ADAB), despite applying several times. Respondents also reported that WROs that work with and represent diverse groups of women, such as sex workers, Harijan women, people with disabilities, women landowners, fisher-folk, women migrant workers, women labourers, indigenous women and survivors of GBV, were marginalised in the Covid-19 response.

**Donor-driven decision-making and its impacts on work and workloads**

There is, of course, a relationship between WROs’ need for funding and their decision-making ability. In almost all the countries that undertook research, WROs reported that their work is heavily impacted by donor priorities. This challenge was reported as one that is faced on an ongoing basis, but that has had specific impacts in the Covid-19 response.

In Liberia, one respondent shared that: “During the Covid-19 emergency, a lot of the NGOs were distributing buckets to households that had other needs, like soap or medication.”

In every country that formed part of the research, organisations adapted activities to ensure they were safe during Covid-19 – however in some contexts it was reported that the extent to which they could do this on their own terms was defined by donors or government agencies.

In Bangladesh, WROs reported that in some instances they had managed to convince donors that funding should be adapted to respond to Covid-19 and that activities could be moved online. Having convinced the donor, the project was then changed when it reached the NGO Affairs Bureau for review, in order to meet the government’s official suggestion. Because online training was new to government officials, it was difficult to convince them of these new methods. This meant that WROs had to develop one type of proposals for donors and another for government, often for the same projects.

Solving a task together in a Sawa workshop for women.
ONGOING CHALLENGES 1: DONOR-DRIVEN DECISION-MAKING

Respondents in Liberia reported that grassroots organisations are not involved in decision-making at the grant preparation level, meaning priorities are decided without input from communities. WROs must apply based on existing funding priorities rather than projects initiated from communities.

In Nigeria, one respondent said: “Some INGOs tend to interfere with the workplans/strategies of their implementing partners, thus watering down the impact of interventions and the strength of the NGO.” This concept of being an ‘implementing partner’ was highlighted by respondents in Bangladesh, who described it as a role they are relegated to: “Even if WROs manage to collaborate and work with international NGOs in a project, it is mostly at implementation level. Generally, INGOs and big NGOs design the project plan, and WROs have to execute it without having the freedom or authority to change or revise any activities or budget.”

In Palestine, many WROs believe that “international organisations have their agendas and they want to dictate to you.” Others say that “Either you take the funding or you remain without funding and close your organisation.”

Visibility, credit, and recognition

WROs agreed there was a lack of visibility and recognition of WROs’ response efforts during Covid-19, which led to them not being able to access funding, and in being excluded from decision-making. Not being able to participate in meetings or even, in some cases, to hold meetings due to funding limitations and Covid-19 restrictions, impacted heavily on WROs ability to promote their work, and to seek support for it.

In South Africa, none of the WROs included in the research received any recognition or support from the government in the Covid-19 response (or outside of it). In most cases, respondents did not try to access support from the government, citing feelings of deep mistrust. Respondents describe a complete lack of interest from government bodies in working with WROs. One organisation shared that they made an application to the Sector Educationand Training Authority to accredit the culinary training they offer, but are yet to receive an acknowledgement or response after more than two years. The same organisation was refused tests for their staff, even after one team member contracted Covid-19.

Respondents in Nigeria reported that being visible to donors and other humanitarian actors had become more challenging during the pandemic. One respondent said that the cost of coordinating meetings and activities online had prevented them from doing so, and said that without meetings, their efforts in the response were not visible enough or adequately recognised.

ONGOING CHALLENGES 2: LACK OF VISIBILITY AND CREDIT

Respondents in Liberia reported a lack of visibility and credit for their work. They explained that there is an ongoing struggle to have their work recognised, particularly at the national level. WROs sometimes don’t get credit for innovative ideas or work done, especially as their projects are often included in large documents with many organisations. One respondent said: “Most INGOs tend to have way more resources for media engagements; video production, hosting interviews, documentation of their work, etc., whereas grassroots organisations don’t always have resources for visibility. Therefore, it’s easy for your work or ideas to be seen [by other actors], copied, and scaled up without giving you credit.”
WROs’ response – Leadership, decision-making and recognition

WROs have continued to respond, despite the challenges faced to their recognition, decision-making and lack of visibility on the ground. Working collaboratively in networks to be seen and heard and to have influence over the response was reported as being a key measure to overcome this challenge.

In the West Bank, Gaza, and Jerusalem, in response to being excluded, feminist organisations, established a national alliance to address violence against women and violence against WROs. According to one interview, being part of the coalition and various networks, helps “get our voice heard more widely.” There is a need to work collectively to “connect our efforts to each other, to have an influence through what we do.” The representative of the WRO believes that being part of coalitions has made it possible to influence the national policies, at least to some extent.

Recommendations:

1. National governments must include WROs and the women they represent at all levels of decision-making during emergencies without exception, including in emergency committees, in part to ensure that support is tailored to the specific needs of different groups. This should be done through:
   - Government planning and guideline development at the local level that includes clear resource and role allocation for WROs and CBOs. There should be strong, gender-sensitive coordination and partnerships between WROs and government agencies. Community members must be educated about the government response guidelines and plans.

2. National governments and international actors must recognise the expertise of WROs working in communities. National governments should have direct channels of communication with WROs and ask them for information and advice, engage in communication with them, respect what they say about the needs or the interventions, reply to their requests. This should be done by:
   - Identifying local NGOs/WROs that are first responders and supporting their leadership of humanitarian activities and allowing NGOs the independence to implement projects with no undue interference by donor agencies. Barriers such as over-regulation must be removed and WROs must be supported to become self-reliant.

3. International actors must strongly and consistently promote women’s participation in decision-making, and work alongside national actors to ensure this approach is taken at all stages in humanitarian action. It is critical to engage with local expert organisations and listen to local knowledge before planning activities. This includes recognising and respecting local actors by including them in decision-making processes, and moving beyond using tokenistic ‘localisation frameworks’. The localisation agenda must be truly embraced and actualised by international and national actors. This should be done by:
   - Ensuring funding to WROs is flexible with significantly less stringent conditions and that WROs have the authority to decide how to organise and allocate funds, to ensure that decision-making is driven by communities and WROs, and not donors.
   - Taking an accountable and transparent approach to partnerships with WROs. Partnerships must be genuine and ensure sustainability of projects. International actors must recognise their power, and not replace local actors, but work closely with them in meaningful partnerships.

4. INGOs should share global tested tools and methods that they have become aware of due to their global roles, to support WROs to strengthen their approaches based on the experiences of others around the world.
Funding and resources

“The issue of accessing donors’ grants is as challenging as dealing with their funding conditions as NGOs often have to shift their interventions to suit donor priorities.”

WRO respondent in Nigeria

Bureaucracy, due diligence, and reporting

“With humanitarian organisations' bureaucratic rules and regulations, engaging the humanitarian system can be very challenging for WLOs.”

The vast majority of WROs reported that bureaucratic requirements present a huge challenge to WROs when accessing funding. These requirements are an ongoing challenge, and one that has been identified repeatedly by feminist humanitarians, who recognise that WROs are consistently and systematically excluded from funding as a result. Being a major concern for WRO respondents, these ongoing challenges have been highlighted in boxes headed 'Ongoing Challenges' throughout the report.

Bureaucratic requirements of governments, INGOs, and UN agencies presented specific challenges for WROs during Covid-19. Respondents reported that the requirement to be formally registered to be eligible for funding delayed vital humanitarian response during Covid-19. In Nepal, respondents reported that this led to a delay in GBV response as well as other elements of WROs' Covid-19 responses.

Many WROs reported that they were not able to access funding to support their Covid-19 response activities due to not being able to fulfil the due diligence requirements of UN agencies and INGOs. One respondent in Nigeria described due diligence processes and funding application requirements as being “herculean”.

In South Africa, one respondent – who is the sole employee of the WRO – shared that resources are not readily available or accessible as funders insist on financial accountability and due diligence that requires more time and expertise than she can spare as she is focused on delivering humanitarian support. It is also noted that in South Africa, small operations such as the respondents one, provide critical services such as safe spaces, and provide for the essential needs of communities in crisis, in the absence of other actors.

The specific requirement for organisations to be registered or accredited (with paperwork often required annually) to work and access funding presents a challenge for WROs. These requirements tend to be both of donors (INGOs and UN agencies) and of national governments.

FHN member in Nigeria, the Women in Humanitarian Response in Nigeria Initiative Network, runs a focus group discussion as part of the research.
Across each of the research countries, WROs reported that funding restrictions, donor agendas, and donor requirements impact significantly on their ability to focus on long-term change agendas during Covid-19. As in all crises, WROs have had to shift to focusing on immediate needs, often reallocating limited resources to do so. In addition, donor priorities shifted during the crisis, which meant that WROs were able to access emergency funding, but it was more difficult for WROs to access funding for their ongoing work and their organisational costs.

This impacts the sustainability of the WROs themselves, who play multiple roles across every context: providing long term services, campaigning and advocating for women’s rights, gender equality and social justice, organising communities and coordinating networks of women, defending human rights, and responding to crises.

WROs respondents in Palestine reported that during Covid-19 it has been easier to fulfill rapid direct needs due to donor’s shifted priorities in the crisis but more difficult to continue long-term impact work and advocacy, as less funding for ongoing work was available. The limits of emergency funding mean that limited amounts of money can be dedicated to staff and other core costs. Having access primarily to emergency funding during the pandemic has meant that there is an insufficiency of resources, which puts the long-term provision of critical services that protect women’s rights at risk.

In Liberia, grassroots women’s organisations were caught off-guard by Covid-19 – existing projects were the only source of funding for staff salaries when the state of emergency and mandatory lockdown was announced. Because staff funding was tied to projects, when WROs had to shut down operations for a period of approximately three months, there was no salary payments to core staff or contractors.
Respondents in Bangladesh reported that many larger organisations offering funding discontinued their work with small WROs during Covid-19, but that donors did not discontinue funding national and big NGOs. As a result of the funding discontinuation, WRO workers in the community lost their jobs, and this impacted GBV programmes in communities. All respondents in Bangladesh reported having extremely focused programmes and long-term commitments to their communities, and that it is distressing to simply remove activities when the project is phased out.

In Nepal, respondents reported that GBV, which was previously supported by government funding, has been overshadowed by Covid-19. Similarly, in Kenya, one respondent experienced a reduction in funding for legal and protection work as focus has now shifted to socio-economic resilience. Other respondents in Kenya also reported limited and reduced funding from the UN and other international donors.

**Donor priorities and flexibility**

The national reports revealed mixed experiences with donor flexibility and acquiring new funds to respond to the gendered impacts of Covid-19. Some WROs had flexibility to adapt their existing funding to respond to Covid-19, but many reported that donors were inflexible, and that this was a major impediment in the response.

In Lebanon and Palestine, none of the respondents reported that they lost funding due to the pandemic. Some respondents in both countries explained that due to the pandemic they acquired new funds from donors they have not worked with before. In several cases, international organisations came forward to propose to the WRO that they work together. In Palestine, it was reported that donors have largely been understanding and flexible and there has been intensive communication between them and WROs, especially via online platforms. Some WROs reported that they have been very lucky when it comes to their relationships with funders.

**Discontinuation and reallocation of funding and its impact on women**

WROs in a number of countries reported having their funding discontinued due to Covid-19 or had resources allocated away from critical protection programs, despite them being all the more critical during the crisis. Others reported that government funding to support work addressing issues experienced by women was diverted to the broader Covid-19 response.

Respondents also reported that WROs often only receive support for projects, and not core funding, which could keep them stable and staffed even as projects start and finish. Respondents noted that WROs form, grow and stabilise during project periods – but once funding support ceases, organisations struggle to maintain organisational sustainability.

**ONGOING CHALLENGES 5: WRO SUSTAINABILITY AND FUNDING MODELS**

As outlined above, donors often require that infrastructure be in place for the organisation to be funded. Effort, time and money is therefore put into this to secure funding, which then cannot be sustained in the long term, when funding is no longer available. One WRO in Nigeria said: “The last INGO requested that I have an office space and employees which I did. Since their departure I’ve had to lay off my staff because no one is giving me money, but I continue to do work alone.” Similarly, respondents in Liberia noted that forcing WROs to ‘formalise’ their processes to access registration shifts their focus from their work, which tends to be working alongside women in communities, to the maintenance of formal systems and requirements, compromising their sustainability in the long-term.
However in the majority of cases, WROs flagged donor inflexibility when it came to re-allocating funds or providing new funds to respond to the new, sudden needs of the Covid-19 pandemic. In some cases, donors were either not receptive to funding changes, or would assume WROs would be able to ‘find’ or ‘re-allocate’ funding from elsewhere. This was stressed by one WRO, who said: “But where do we allocate from when all activity budgets are restricted to activities? So it is like, you have to take from one place to put in another place, when we already are running on short and restricted budgets! So this has not been supportive.”

In Liberia, respondents reported that during Covid-19, funds had to be spent as they were originally intended, despite the urgent needs of communities during the pandemic. This added challenges to WRO's activities, especially when their projects were not designed to provide material aid, and yet they still had to reach and respond without additional donor resources: “The people call, and they need us, and they want a fast response. So this was in a way a burden and a pressure on us.”

In Liberia, respondents reported that grants tend not to specifically target grassroots organisations, creating unnecessary competition between them and INGOs, which puts WROs at a great disadvantage.

In Bangladesh, in some regions, competition between WROs was reported as, when funding was limited WROs felt they could not disclose their programming activities or share information with each other.

In Palestine, respondents also reported that limited international funding has led to competition amongst WROs. One respondent said: “I see that a call for proposal comes and all these institutions competing to write proposals to get a chance. There should be a clear agreement – these institutions work in these sectors, so they have a certain budget…. All this competition, and what is happening, and who is the best and… the competition is not clean either.”

As reported in the final chapter of this report, much of the strength and the distinction in the feminist approach of WROs is in their ‘sisterhood’ and their collective action. Competition for resources has the potential to undermine this way of working and the power that comes with it.
Distinction between feminist funders and large donor funders

Several respondents across countries reflected on the difference between 'smaller, feminist or women-led' international donors, and other larger international donors. Generally, WROs reported that there is a clear distinction, and that it is critical that feminist donors and actors act to ensure that larger donors take a more feminist approach. WROs reported that this is critical during Covid-19, the impacts of which will be felt by WROs and the communities they work with for years to come.

In Palestine, respondents asserted that is is incumbent on feminist donors to influence big donors, including governments and international organisations, to take a similar approach. One respondent said: “The feminist organisations internationally have to support WROs that work on a grassroots level in a more significant manner... the major support comes from foreign ministries, international government organisations or aid agencies and these need to be flexible, their regulations, their contracts etc. They have the major role in providing major funding. They need to provide strategic support, so the feminist organisations have to take this into account. They need to become a more viable, dynamic and effective player in order to support us. Because I don’t think that Covid is going to go away there must be commitment to the sustainability of women’s organisations that are working on the ground...”

WRO respondent in Palestine

WROs’ solutions – funding

While some WROs reported being able to adapt and rechannel funds from existing projects, and others even reported accessing new funding from new donors, many organisations shared that they used alternative ways of funding relief efforts. The ‘alternative ways’ point out that, in many respects, the humanitarian system and traditional funding modalities failed WROs and therefore failed to meet the needs of vulnerable communities.

Shockingly, five of the fourteen WRO respondents in Bangladesh used their own funds to facilitate relief activities. Funds were contributed by staff, board members, and in some cases the Executive Director covered costs. Similarly, in Nigeria, many WROs resorted to using their partnerships and networks to raise funds through crowdfunding (e.g. individuals and corporations) to continue their work in supporting their communities.

Some WROs in Liberia used finances from the Village Saving Loans Association to fund their Covid-19 response. Others used materials already available to them like buckets and bamboo to set up wash stations and requested donations from community members for the purchase of other items, such as soap and disinfectant.

In South Africa, WRO respondents relied entirely on community fundraising and mobilisation to provide humanitarian assistance. One respondent shared that in Masiphumelele, Cape Town, children were no longer attending school, they had no food, no masks, and were completely unsupervised during the day. She reports that they had no access to basic hygiene materials such as soap. She “put out a desperate call on social media, to raise awareness of the situation, and for support to feed and supply the children with masks and soap... she describes the subsequent response as being a wonderful example of humanitarian aid from individuals, since she was able to source materials and food exceeding her expectations through private donations.”
Findings indicate that there is a clear need for donors to consider partnerships on different terms and to move towards meaningful partnerships that move beyond simply providing funding, with a real shift of power and decision-making to WROs to determine how they use funding and the way that it is managed.

“Most of us are driven by passion but because of limited funds, using whatever available means to source for funds to make sure that these people meet their needs as much as they can.”

WRO respondent in Nigeria

**Recommendations:**

1. Donors must take action immediately to ensure that funding to WROs is as direct as possible. Donor governments and UN agencies should fund WROs directly rather than through INGOs. INGOs should fund WROs working at local and grassroots level directly, rather than through big national NGOs, recognising that time and cost implications are not easily measured and dependent on each WROs context.

   - For donors unable to provide direct funding, priority should be given to women funds or networks, and intermediaries with strong and equitable partnerships with local WROs.

2. Donors must ensure that funding is designed to ensure sustainability of both WROs and their work, and include this as an unwavering commitment in their approach to humanitarian action. This includes funding humanitarian and development interventions simultaneously, to ensure that long-term change objectives are not compromised, and WROs and other grassroots, local, and national organisations can work towards a sustainable future while meeting immediate needs. It also includes funding longer term work, including multi-year projects and the continuation of funding for existing projects, where possible.

   - Donors must ensure that initial short-term funding provided to support Covid-19 response efforts is increased to long-term projects, recognising that the virus has not yet disappeared and that WROs will be responding to the impacts of the pandemic for many years to come.

3. Donors must relax application and reporting requirements, particularly during emergencies. Subjecting grassroots, local, and national WROs to inflexible reporting requirements should be recognised as being unjust and contrary to commitments of life-saving, effective humanitarian assistance when it impinges on their ability to do their work at the frontline of crisis and disasters.

4. Donors must ensure that funding is inclusive. This includes recognising that organisations representing persons experiencing different forms of marginalisation (such as women with disabilities, or people from LGBTQIA+ communities) receive targeted funds.

5. Donors must recognise and value quality as much as quantity, depth as much as breadth. Organisations working with small numbers of women must not be excluded from funding opportunities.

FHN member in Nigeria, the Network of Disabled Women, runs a focus group discussion as part of the research.
Access and knowledge of digital technology was not the only challenge with shifting work online. Several WROs reported that doing their work with women in person outside of the home was essential to the objective of the project, and that having to shift to online ways of working meant that women were, in some instances, afraid to attend.

In Palestine, in one instance, participants were infected with Covid-19 at an awareness raising training. Afterwards they were afraid to return to the group so were offered online training instead, which produced mixed feelings. One woman reportedly said: “I am not comfortable talking with the group online, while my man is in the house.”

Challenges of working from home and the impact on WROs and women

The gendered impacts of Covid-19 and national lockdowns were felt by WROs and their staff – many of whom are women. WRO staff working at home were, like women around the world, burdened with additional unpaid care responsibilities, which they had to take on at the same time as continuing their paid duties.

In Bangladesh, WROs reported that they lost many of their female volunteers during the pandemic, especially women working in the community: “this was due to the extra workload that women had to take on in the home including extra cooking, cleaning, and caring for family members who might not ordinarily have been at home.”

It was reported that, in some cases, donor response to the ‘double burden’ facing female staff working at home during Covid-19 deepened its impacts. Some donors continued to require timesheets during the crisis and would only cover the hours of work that WRO staff were able to complete while at home, which were inevitably fewer.
Feminist solutions to challenges presented by the humanitarian system during Covid-19

“Women are being left behind in all decisions and actions around Covid-19. We needed to take action to change this.”

WRO respondent in Nigeria

Collective action

The importance of collective action amongst WROs in responding to Covid-19 and to the challenges they face was echoed by respondents across many of the countries that undertook the research. WROs found support in peer organisations to deliver their programs despite multiple challenges, sharing resources and strategies. WROs worked together to ensure that their voices were heard and that collectively, they were able to influence decision-making.

In Liberia, some organisations formed alliances such as the Women Leading in Crisis Alliance, to ensure that women’s voices are fully incorporated into the detection, prevention, and recovery mechanisms in response to Covid-19 and future crises. Some were able to respond on a larger scale as part of the Liberia Women’s Humanitarian Network.

In Nepal, one respondent explained that because there is a “sense of sisterhood among members of women’s groups, it is easy to work collectively by sharing their networks, funds, and even human capacity.” Respondents reported that community-based networks and women’s groups have been extremely beneficial in dealing with issues and communicating during Covid-19. They shared that women in the community find it comfortable to share their problems and issues with other fellow network members.

Recommendations:

Donors and international actors more broadly must immediately acknowledge and prioritise equal access to internet, and digital technology and infrastructure to ensure that WROs are not excluded through online ways of working. This must be achieved by:

- Consistently including specific and additional funds in all grants to ensure that WROs can cover the costs of internet access and digital infrastructure.
- Working with WROs to advocate for national infrastructure that ensures equitable internet access.

One respondent in Palestine said:

“Nobody was able to do full time work at home with the closure, especially women. They took care of their children. They had their job and unfortunately, they also had their husbands to take care of. So it meant that these salaries of women employees would be halved, because they could not do full time work and yet, some major donors were so unsympathetic to that. And it was very clear that they will support only the actual time sheets of the work done. There was no use in arguing with them. This was it!”

The practical challenges of working during the Covid-19 pandemic also included impacts on day-to-day operations for WRO offices.

One respondent in Kenya shared: “We have had reported cases of members of staff of other organisations we partner with and work with turning out positive for Covid-19. We had to completely close the office for two weeks and fumigate the office during that time. I took my test which turned out negative before returning to work. We worked from home for most of this period.”
members and maintaining and amplifying this collective voice can help strengthen their influence at the local level.

In Nigeria, respondents said that they were able to make decisions once they joined the Women in Humanitarian Response in Nigeria Initiative Network – a coalition of 208 grassroots WROs from across Nigeria. In Palestine, a national alliance of feminist organisations in the West Bank, Gaza, and Jerusalem was formed to address violence against women and against WROs. They worked together to successfully achieve representation on emergency committees – a decision-making space they were previously shut out of.

In South Africa, respondents assert that “with enough confident, brave women from every background standing together in solidarity, the patriarchal hegemony of socio-economic systems can be deconstructed and replaced with equitable ones.”

Leave no-one behind – intersectional approaches

In each of the countries, WROs work with diverse and marginalised groups of women, and take specific and targeted action to ensure that nobody is left behind. Many WROs, including a number of the organisations participating in this research, represent marginalised women and have focused on ensuring their inclusion in the Covid-19 response, and in responding to the barriers they face.

In Nigeria, respondents shared that they have worked with and represented women with disabilities, women living in IDP camps, female inmates in correctional facilities, widowed women, elderly people, and have provided targeted support to women with different needs throughout the Covid-19 response. Respondents in Bangladesh reported that WROs have a strong presence in communities and represent and work closely with diverse and marginalised groups of women. In fact, each country reported specific work that WROs have been doing with women of across different groups, taking an intersectional approach to ensure nobody is left behind.

CASE STUDY: THE CREATIVE ARTS

In South Africa, the importance of the creative and performing arts were emphasised as an interdisciplinary vehicle for healing, development and education; three areas in South African society which require the advocacy and cultivation of empathy and ubuntu. Ubuntu is the indigenous concept of humanity that says ‘I am because you are’. Respondents insisted that this is best achieved with and through the arts.
CONCLUSION

Those wanting to join the fight against gender injustice and support survivors must recognise women as experts in their own lives. Local communities, national governments, and the international community must recognise and be willing to learn from the expertise and resilience of women-led organisations at grassroots, local, and national levels, who remain motivated and innovative in the face of extreme obstacles. The women-led organisations included in this research, and others like them, should be provided with a pathway to lead the Covid-19 pandemic response rather than be sidelined with no support and no decision-making power.

The provision of funding and deliberate and targeted sharing of information with WROs by national and international actors is essential to ensure that WROs are able to continue and upscale the essential work that they are doing to reach the most vulnerable groups and in communities they work in and represent. Organisations that represent marginalised groups, and more specifically, women experiencing marginalisation (such as women with disabilities, indigenous women, internally displaced persons, and refugees) must be systematically included when information is distributed, when decisions are made with regards to national humanitarian action plans, and in funding bids.

The recommendations in this report have been collated from the eight national reports produced by women-led organisations in Nepal, Bangladesh, Lebanon, Palestine, Liberia, Nigeria, South Africa, and Kenya. For specific recommendations for international actors, national governments, local governments, and other WROs and women-led organisations in these countries, please see national reports. These can be found on the FHN website.

Recommendations:

1. Donors must support WROs to strengthen networks that engage with women and girls to ensure that the gender dynamics are adequately addressed, and efforts are not duplicated.

2. International actors must support WROs to build a solid body of grassroots evidence to influence international as well as national policy actors.

Based on their own learnings and experiences, recommendations for WROs from WROs include:

1. Build partnerships and alliances with each other and build on past successes.

2. Note the points of strength in the internal environment and use them to continue work during emergencies.

3. Represent all women, and especially those that are additionally marginalised or share issues eg. because of disabilities, ethnic background, educational background, or women landowners, sex workers, etc.

4. Be visible on the ground, listen to the needs of women and their communities.

5. Have an emergency plan ready with different scenarios and do regular evaluations.

6. Include boys and men at the grassroots level as appropriate to shift their patriarchal mindset.
RECOMMENDATIONS

Gender-based violence

1 All actors must recognise that the existing, ongoing global pandemic of violence against women and girls has been exacerbated by Covid-19 and take urgent and effective action by:
   • Allocating adequate resources to address GBV.
   • Including WROs in response and recovering planning and execution of response and recovery plans as leaders, both within the humanitarian system and through governments and other duty bearers.
   • Recognising all forms of violence against women and girls, including increasing child, early and forced marriage, and ensure long-term support for survivors of all forms of GBV.

2 International actors must immediately stand behind WROs to put pressure on governments to implement existing laws to prevent and respond to violence against women and girls and, where necessary to pass laws that help protect women and girls from violence, including in times of crisis, and to work with WROs in their drafting. Legal frameworks are critical in protecting women and girls in times of crisis. International actors must recognise this and include this pressure in the action they take to respond to emergencies.

3 International and national actors must prioritise humanitarian interventions that are gender transformative and focus on the needs and concerns of women and girls, (specifically in preventing and responding to GBV). This must include funding and ensuring the sustainability of safe spaces for women as defined by the women themselves, and providing services that ensure physical, emotional and mental health.

Livelihoods and access to critical services

1 National and local governments must ensure that service provision that protects women’s rights and supports livelihoods and economic opportunities is inclusive, recognising that rural areas are often the most disadvantaged, and that standardised methods of distributing livelihood support and assistance sideline women with disabilities and other marginalised groups.

2 National and local governments must work with WROs to design humanitarian response schemes and stimulus packages to ensure that the distribution mechanisms are just and include access to financial support, capital, and supplies that are most critical to women and girls.

3 Donors and national and local governments must ensure funding for services that protect women’s rights is not diverted in times of crisis, including maternal and newborn child health and legal services.

4 National governments must, in the case of further lockdowns, work with WROs to designate essential services that must stay open and/or ensure access to specific services through adapted means and ensure that majority-female jobs are not ignored from those considered essential.

5 International actors and national and local governments must work with WROs to distribute cash directly to women when it is safe to do so using methods that ensure women are protected.
Compounding crises

1 Governments and the international community must acknowledge the critical role WROs play to address the gendered impacts of crisis:

- Work closely with WROs to reach at-risk communities, including by funding WROs for this work and ensuring ease of access to hard-to-reach communities.
- Invest in preparedness for WROs so that they are connected to the humanitarian system, trained on the most up-to-date industry standards, and can scale up their funding and programming quickly in the event of emerging crises.

Leadership, decision-making and recognition

1 National governments must include WROs and the women they represent at all levels of decision-making during emergencies without exception, including in emergency committees, in part to ensure that support is tailored to the specific needs of different groups. This should be done through:

- Government planning and guideline development at the local level that includes clear resource and role allocation for WROs and CBOs. There should be strong, gender-sensitive coordination and partnerships between WROs and government agencies. Community members must be educated about the government response guidelines and plans.

2 National governments and international actors must recognise the expertise of WROs working in communities. National governments should have direct channels of communication with WROs and ask them for information and advice, engage in communication with them, respect what they say about the needs or the interventions, reply to their requests. This should be done by:

- Identifying local NGOs/WROs that are first responders and supporting their leadership of humanitarian activities and allowing NGOs the independence to implement projects with no undue interference by donor agencies. Barriers such as over-regulation must be removed and WROs must be supported to become self-reliant.

3 International actors must strongly and consistently promote women’s participation in decision-making, and work alongside national actors to ensure this approach is taken at all stages in humanitarian action. It is critical to engage with local expert organisations and listen to local knowledge before planning activities. This includes recognising and respecting local actors by including them in decision-making processes, and moving beyond using tokenistic ‘localisation frameworks’. The localisation agenda must be truly embraced and actualised by international and national actors. This should be done by:

- Ensuring funding to WROs is flexible with significantly less stringent conditions and that WROs have the authority to decide how to organise and allocate funds, to ensure that decision-making is driven by communities and WROs, and not donors.
- Taking an accountable and transparent approach to partnerships with WROs. Partnerships must be genuine and ensure sustainability of projects. International actors must recognise their power, and not replace local actors, but work closely with them in meaningful partnerships.

4 INGOs should share tools and methods that they have become aware of due to their global roles, to support WROs to strengthen their approaches based on the experiences of others around the world.
Donors must take action immediately to ensure that funding to WROs is as direct as possible. Donor governments and UN agencies should fund WROs directly rather than through INGOs. INGOs should fund WROs working at local and grassroots level directly, rather than through big national NGOs, recognising that time and cost implications are not easily measured and dependent on each WROs context.

- For donors unable to provide direct funding, priority should be given to women funds or networks, and intermediaries with strong and equitable partnerships with local WROs.

Donors must ensure that funding is designed to ensure sustainability of both WROs and their work, and include this as an unwavering commitment in their approach to humanitarian action. This includes funding humanitarian and development interventions simultaneously, to ensure that long-term change objectives are not compromised, and WROs and other grassroots, local, and national organisations can work towards a sustainable future while meeting immediate needs. It also includes funding longer term work, including multi-year projects and the continuation of funding for existing projects, where possible.

- Donors must ensure that initial short-term funding provided to support Covid-19 response efforts is increased to long-term projects, recognising that the virus has not yet disappeared and that WROs will be responding to the impacts of the pandemic for many years to come.

Donors must relax application and reporting requirements, particularly during emergencies. Subjecting grassroots, local, and national WROs to inflexible reporting requirements should be recognised as being unjust and contrary to commitments of life-saving, effective humanitarian assistance when it impinges on their ability to do their work at the frontline of crisis and disasters.

Donors must ensure that funding is inclusive. This includes recognising that organisations representing persons experiencing different forms of marginalisation (such as women with disabilities, or people from LGBTQIA+ communities) receive targeted funds.

Donors must recognise and value quality as much as quantity, depth as much as breadth. Organisations working with small numbers of women must not be excluded from funding opportunities.

Operations

Donors and international actors more broadly must immediately acknowledge and prioritise equal access to internet, and digital technology and infrastructure to ensure that WROs are not excluded through online ways of working. This must be achieved by:

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- Working with WROs to advocate for national infrastructure that ensures equitable internet access
**Feminist solutions**

1. Donors must support WROs to strengthen networks that engage with women and girls to ensure that the gender dynamics are adequately addressed, and efforts are not duplicated.

2. International actors must support WROs to build a solid body of grassroots evidence to influence international as well as national policy actors.

Based on their own learnings and experiences, recommendations for WROs from WROs include:

1. Build partnerships and alliances with each other and build on past successes.

2. Note the points of strength in the internal environment and use them to continue work during emergencies.

3. Represent all women, and especially those that are additionally marginalised or share issues eg. because of disabilities, ethnic background, educational background, or women landowners, sex workers, etc.

4. Be visible on the ground, listen to the needs of women and their communities.

5. Have an emergency plan ready with different scenarios and do regular evaluations.

6. Include boys and men at the grassroots level as appropriate to shift their patriarchal mindset.

**REFERENCES**

1. An intersectional approach is one that recognises the different and intersecting forms of exclusion, oppression, and marginalisation experienced by different women impact and exacerbate each other. It is the acknowledgement of different experiences amongst women, including identities informed by factors such as race, ability, age, and sexuality, and action taken to ensure meaningful inclusion of all women.

2. For the purposes of this report, the term ‘WRO’ has been used to refer to organisations as a primary term, as most organisations that were included in the research are women’s rights organisations and women-led organisations, or organisations with a strong focus on gender equality and women’s rights in their work. However, the terms individual responding agencies have used to refer to themselves have been retained throughout.

3. One leading organisation (Paramount Young Women Initiative) is led by an individual member of the FHN, but is not an organisational member.


5. This Data was collected by SAWA, an FHN member working in Palestine.


7. Harijans in South Asia are discriminated against by the caste system, a social structure which treats some people as ‘untouchable’.


10. The responder here is referring to smaller organisations (international or local) who have strong feminist values rather than well-known and established international donors.
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