Asia Pacific Regional Outlook June 2020



Sexual and gender-based violence

Domestic violence and health

Rates of domestic violence have soared worldwide over the first half of 2020. Quarantines have forced families to live in close proximity constantly, sometimes in small and overcrowded spaces, under economic stress and at risk of catching the virus. Strict lockdowns mean that women experiencing violence in the home are unable to escape or seek refuge. Domestic violence reports in China's Hubei province in February increased from 47 in 2019 to 162 this year, and the Philippines has seen over 3,600 cases of violence against women and children since the quarantine began. Indonesia also recorded an increase, while noting that domestic violence remains underreported. In June 2020, a high profile domestic violence case in Papua New Guinea involving well-known athlete, Debbie Kaore, has brought attention to the high rates of domestic violence, with more than two-thirds of women having experienced violence in the home in the Pacific nation.

In Bangladesh, more than 4000 women and children were subjected to domestic violence in April, with some experiencing it for the first time. In a shocking case in April, a man livestreamed the murder of his wife on Facebook. In Bangladesh as well as other countries in the region, the pandemic and associated financial stress is leading to an increase in child marriage, as families marry off their underage daughters to ease the financial burden. Vii

As resources are diverted to controlling the pandemic, regular and routine health care becomes less accessible, including maternal and reproductive health care, and women who have been harmed in the home may be less able to access physical or mental health services. Access to services is compounded by Covid-related labour shortages and overcrowded hospitals. VIII In addition, with the loss of work opportunities and financial hardship, women who are more economically dependent on males in the household have reduced options for leaving violent situations.

For women belonging to vulnerable groups, such as foreign workers, or ethnic or religious minorities, and those living in conflict-affected areas, the risk of sexual and gender based violence is particularly high. Armed conflict has continued in some regions of Myanmar throughout the pandemic period, with civilians unable to flee due to lockdowns. Sexual violence has been a significant tool of attack against ethnic minorities in Myanmar in the past and a culture of impunity continues to flourish.

Covid-19 and underlying gender inequality

In countries where underlying gender inequalities persist, such as higher illiteracy rates and lower internet access for women, the ability to receive important information about social distancing and hygiene is limited. UN Women has identified a lack of information and awareness among women in Bangladesh and Pakistan, where they are less likely to own mobile phones, and where education for girls tends to be limited. Even when information is accessible, the ability to abide by health guidelines may not be. For instance, in areas where women have to travel long distances to access water, frequent handwashing may not be possible.

LGBT+ rights

In a number of Asian countries, LGBT+ communities have been scapegoated for the spread of the coronavirus, amplifying existing prejudice and discrimination faced by members of those communities. In South Korea, for example, a spike in cases linked to nightclubs has seen the LGBT+ community blamed by the media and attacked on social media.xi

Asia Pacific Regional Outlook June 2020



In Indonesia, some are advocating for legislation, known as the "Family Resilience Bill", which would hold LGBT+ people in "government-sanctioned rehabilitation centres" and compel relatives to report them to authorities. XII There have been a number of assaults and even homicides of LGBT+ people in Malaysia, while Singapore has refused to overturn its law against homosexuality. Some members of the LGBT+ community may be reluctant to seek health care if they are experiencing Covid-19 symptoms or to purchase medication for underlying conditions, for fear of discrimination. Others may experience violence in the home during lockdowns, either at the hands of partners or family members. In these cases, accessing appropriate services under quarantine will be especially challenging due to the stigma and in some countries, the requirement to provide authorities with a reason for leaving the house. XIII

Recommendations:

It is recommended that governments in the region:

- 1. Apply a gender lens to coronavirus responses and ensure women's participation in policy development, the formation of emergency responses and recovery efforts;
- 2. Protect existing women's health services and develop measures to maintain access to maternal and reproductive health care;
- 3. Provide support and assistance to people in domestic violence situations and run public awareness campaigns to reduce its occurrence;
- 4. Acknowledge the role of women as frontline workers and ensure they are offered protection and support, including PPE, fair pay and conditions, and mental health care;
- 5. Amend legislation that discriminates against the LGBT+ community and ensure adequate and accessible services for the community.

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iv Reaching domestic violence survivors amid the pandemic, 11 June 2020,

^v Debbie Kaore: Papua New Guinea sports star 'attacked by partner', 8 June 2020, https://www.bbc.com/news/world-asia-52967213

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Asia Pacific Regional Outlook June 2020



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