

Gender

- Effective responses to COVID-19 must fully consider and address the specific situations, perspectives and needs of women, girls and LGBTI people and ensure that any measures taken do not directly or indirectly discriminate based on gender.
- Women and girls are likely to face increase care-giving roles in the home, putting them under additional stress and potentially increasing their risk of infection. Across the globe, women comprise 70% of health workers, including midwives, nurses, pharmacists and community health workers on the frontlines, increasing their risk of exposure and infection. Targeted measures to address the disproportionate impact of the crisis on women and girls are needed.
- In many countries, women face disproportionate risks in the job sector, where many work in the informal sector (e.g. domestic workers, nannies, agriculture or supporting family businesses) and may be the first to lose their jobs or suffer from the consequences of the crisis given that they do not have social security, health insurance, or paid leave. Many women are also dependent on accessibility and affordability of childcare, which is now decreasing, further restricting their ability to work and earn an income.
- Older women are more likely to live in poverty or with low or no pensions which may exacerbate the impact of the virus, and limit their access to goods, food, water, information and health services.
- Restrictive public health measures, including stay-at-home orders or lockdowns, are increasing exposure to gender-based violence, particularly intimate-partner violence and domestic violence. Support services and safe shelters for victims of gender-based violence need to be continued as a priority, including effective referrals, and ensuring the availability and accessibility of avenues to safety for victims. Information on hotlines and online services should be included in COVID-19 messaging.
- Sexual and reproductive health services should be seen as a life-saving priority and integral to the response, including access to contraception, maternal and newborn care; treatment of STIs; safe abortion care; and effective referral pathways, including for victims of gender-based violence. Resources should not be diverted away from essential sexual and reproductive health services, which would impact the rights and lives of women and girls in particular.
- LGBTI people also face heightened risks during this pandemic, and specific measures should be incorporated into response plans to address these impacts. Available data suggests LGBTI people are more likely to work in the informal sector, and also have higher rates of unemployment and poverty, Health services particularly relevant for LGBTI people should continue during this crisis, including, HIV treatment and testing.
- Political leaders and other influential figures should speak out against stigmatization and hate speech directed at the LGBTI people in the context of the pandemic.
- Given stay-at-home restrictions, some LGBTI youth are confined in hostile environments with unsupportive family members or co-habitants, increasing their exposure to violence, as well as their anxiety and depression. States should ensure that support services and shelters remain available to them during this period.
- View the [COVID-19 and Women's Human Rights: Guidance \(PDF\)](#)
- View [Guidance on COVID-19 and the Human Rights of LGBTI People \(PDF\)](#)