WEEKEND READER



COVID-19 RESPONSE AND RECOVERY PLANS MUST PRIORITISE SOCIAL AND ECONOMIC JUSTICE FOR WOMEN

The gradual resumption of economies accompanied by the easing of lockdown restrictions has resulted in increased economic activity globally and regionally. However, much still needs to be done in the way of building sustainable health systems that stretch beyond the COVID-19 pandemic, ensuring democratic governance, transparency and accountability, improving gender justice and equity for women and girls as well as increasing inclusive education for all in order to reduce inequalities. The pre-existing social order often leads to marginalisation of women, it is therefore, important to prioritise women in COVID-19 recovery plans as women are on the frontlines of providing health and childcare services leading to exposed risk and increased vulnerability. The coronavirus pandemic reveals the urgency of sustained investments in health, childcare, education and other services, including essential services for survivors of gender-based violence. The growing reports globally of a "shadow pandemic" of domestic and sexual violence against women underline the importance of continued action to prevent and respond to it.

According to the World Health Organisation (WHO), as of 8 June 2020, 187 875 Covid-19 cases had been reported across 54 African states. The Human Rights Watch noted that the COVID-19 pandemic has uncovered chasms in healthcare services in many African countries. Many countries have been unable to meet the demands of the COVID-19 pandemic including addressing the already existing healthcare needs of their populations.

The right to health is provided for in Article 16 of the African Charter on Human and People's Rights. It is important for African countries to realign their healthcare systems and infrastructure to ensure compliance with international human rights standards. Furthermore, it is imperative that governments ensure that they invest in their healthcare systems even beyond the scope of the COVID-19 pandemic. Chronic lack of investment in healthcare infrastructure and equipment has been cited as one of the reasons why African nations have challenges in retaining skilled healthcare workers, providing sufficient essential medication, and reducing mortality rates of perennial diseases such as malaria.

For poor and marginalised women already disproportionately and negatively affected by pre-existing inequalities and gendered discrimination, the COVID-19 crises adds an additional burden alongside chronic health crises, environmental disasters and gender-based violence. This means that recovery from the COVID-19 crises will be impossible for women unless other developmental challenges such as lack of socio-economic opportunities, underrepresentation in political spheres and lack of access to basic health care services are addressed. The COVID-19 crisis gives adequate justification to invoke emergency measures to increase overall public health budgets to match the recommendation of the Abuja Declaration for national budgets to invest 15% in healthcare. In addition, there is need to ensure ringfenced support specifically for sexual reproductive health rights and maternal care. There is need for governments to effectively curb odious debt, illicit financial flows, corruption and poor public resources management to increase the resources available to finance public health and other critical social services.



The lockdown measures being implemented have culminated in an upsurge in the number of gender-based violence and femicide cases. It is recognised that the inequalities between men and women within countries are structural and systemic. It is vital that responding to the crisis does not exacerbate and worsen these inequalities but rather reduces them and lays a foundation for greater equity and opportunity for all moving forward.

Globally, the Covid-19 pandemic has created the greatest interruption of education systems in history affecting learners of all ages across all continents. The disruption of school has impacted 94% of the world's student population with up to 99% in low and lower-middle income countries. The pandemic is aggravating prevailing education disparities by reducing the opportunities for many of the most vulnerable children, youth, and women – particularly, those living in poor or rural areas, young girls, refugees and persons with disabilities – to continue their learning. Learning losses also threaten to extend beyond this year and erase decades of progress. Approximately, 23.8 million additional children and youth (from pre-primary to tertiary) may drop out or not have access to school next year due to the pandemic's economic impact alone.

While the pandemic has inspired innovation within education sectors, from online learning to radio and television learning as well as take home packages, in Zimbabwe, at primary and secondary level, this has further increased the gap between private and public education. Sustainable development goal (SDG) number 10 provides for reduced inequalities in and among countries. The inequality between the two has been intensified with private school children being able to attend school online and continue with their curriculum while government school children have had no learning since before the lockdown on March 30, 2020.

It is essential that even in times of crises, we take into account the gendered nature of existing laws and practices which often maintain, reproduce or exacerbate gender inequalities. The dynamic nature of this pandemic and the response actions require well informed strategies to balance citizen's needs, particularly women, who are the most impacted, with national priorities. Although the pandemic brings challenges, a gendered lens must be applied to ensure women's safety and reduce social disparities.