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# ASSESSING THE RELATIONSHIP BETWEEN GENDER BASED VIOLENCE AND COVID-19 PANDEMIC IN UGANDA,

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## Introduction

Whereas there is an abundance of literature linking gender based violence (GBV) in the aftermaths of natural related disasters, the linkage with health related emergency pandemic is scanty. However, some studies have analyzed GBV and Ebola and Zika virus epidemic in Liberia in 2014-16<sup>1</sup> and Democratic Republic of Congo (DRC) in 2018, GBV and HIV<sup>2,3</sup> and gender/GBV and Covid-19. With the prevailing coronavirus (covid-19) global pandemic, which has driven countries to declare lockdowns, cases of GBV have also spiraled. The increasing cases of GBV amidst the coronavirus pandemic highlight the importance of the relationship between GBV and health related emerging epidemics or pandemic situations. Particular questions GBV and Covid-19 such as: Have cases of GBV or threats of violence increased since Covid-19 Lockdown in Uganda? Why and how do GBV occur in health related emergency situations? What are the implications for policy and research? These and other questions are worthy reflecting on and responding to.

It is, therefore, within this context that this paper interrogates the relationship between GBV and covid-19 in Uganda. This is important so as to re-emphasize the fact that whereas governments' priority is on the technical response GBV remains a thorn in women's lives. Theoretically, this study is informed by theories of unequal power relations between men and women whereby one individual -in this case the man- to dominate/exploit the other -who is the woman. The Socialist Feminist approach espoused by Young (1992, 183-193) cited in the Stanford Encyclopedia of Philosophy (2016)<sup>4</sup>, identifies five faces of oppression/domination as economic exploitation, socio-economic marginalization, lack of power or autonomy over one's work, cultural imperialism, and systematic violence.

According to Young<sup>5</sup> for an individual to be subjected to one of these forms of power is enough to consider the individual oppressed. We argue that women in Uganda face varied inequalities that cut across the five faces.

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<sup>1</sup>See Dala T. Korkoyah, Jr. & Francis F. Wreh, Ebola Impact revealed: An Assessment of the Differing Impact of the Outbreak on Women and Men in Liberia, July 2015

<sup>2</sup>Harvard School of Public Health (2006). HIV/AIDS and Gender-Based Violence (GBV) Literature Review. [www.hsph.harvard.edu/pihhr](http://www.hsph.harvard.edu/pihhr)

<sup>3</sup>Roberts, S. T., B. P. Flaherty, R. Deya, L. Masese, J. Ngina, R. S. McClelland, J. Simoni and S. M. Graha (2018). Patterns of Gender-Based Violence and Associations with Mental Health and HIV Risk Behavior among Female Sex Workers in Mombasa, Kenya: A Latent Class Analysis. *AIDS Behavior.*; 22(10): 3273-3286. doi:10.1007/s10461-018-2107-4.

<sup>4</sup>Allen, Amy, "Feminist Perspectives on Power", The Stanford Encyclopedia of Philosophy (Fall 2016 Edition), Edward N. Zalta (ed.), URL = <<https://plato.stanford.edu/archives/fall2016/entries/feminist-power/>>.

<sup>5</sup>Ibid

They are economically exploited, and socio-economically marginalized; they lack power or autonomy over their work particularly because the majority work in the informal sector and in domestic sphere; they have experienced cultural oppression any time in their lives; and they face systematic violence. Hence within the Uganda context women are already exposed to GBV.

However, the question here remains what is the relationship between this oppression/domination that leads to GBV and Covid-19. This relationship is suggested by Peterman et, al., (2020) <sup>6</sup> who note an increase in GBV in the countries where coronavirus was taking its toll. According to the authors countries that reported increased GB in mid-March 2020 were Australia, Brazil, China and the United States.

Consequently, the authors suggested nine (direct and indirect) pathways linking pandemics and Violence Against Women/Children (VAW/C),(2020:5):

- *Economic insecurity and poverty-related stress;*
- *Quarantines and social isolation;*
- *Disaster and conflict-related unrest and instability;*
- *Exposure to exploitative relationships due to changing demographics;*
- *Reduced health service availability and access to first responders;*
- *Inability of women to temporarily escape abusive partners;*
- *Virus-specific sources of violence;*
- *Exposure to violence and coercion in response efforts;*

For this paper focused on those pathways theorized to have a direct relationship with Covid-19. These are: economic insecurity and poverty-related stress; quarantines and social isolation, inability of women to temporarily escape abusive partners; virus-specific sources of violence.

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<sup>6</sup>Peterman A., A. Potts, M. O'Donnell, K. Thompson, N. Shah, S. Oertelt-Prigione, and N. van Gelder (2020). Pandemics and Violence Against Women and Children. Working Paper 528. Washington, DC: Center for Global Development. <https://www.cgdev.org/publication/pandemics-and-violence-against-women-and-children>; <https://plato.stanford.edu/entries/feminist-power/>

## Methodology

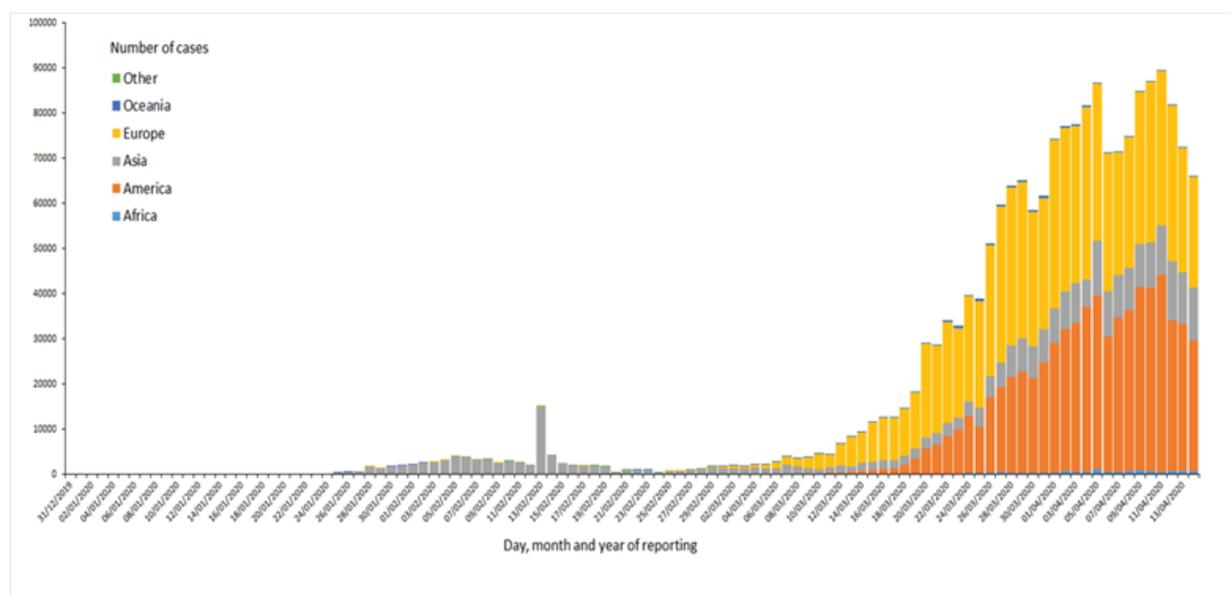
Establishing the relationship between GBV and covid-19 pandemic lockdown presupposes a correlation status, which would require using quantitative methods of data collection. However, this paper utilized qualitative methods using documentary reviews and in-depth interviews from selected key informants. This is because covid-19 pandemic shutdown relationship to GBV is that of an extraneous variable, which mainly requires understanding the conditions which the shutdown engendered and how they magnify and catalyze that relationship. Understanding how the circumstances of covid-19 shutdown cause GBV can best be captured using qualitative methods. Thus, the analysis of this paper draws secondary data from a desk review of both academic and grey literature on natural disasters, health emergency and GBV; articles and reports from the internet; newspapers; and social media.

The paper also draws from primary data which was garnered through phone interviews with 6 purposively selected key informants: two male LC1 Councilors from Amuru and Omoro, districts, Northern Uganda; a journalist working with New Vision Newspaper and a former female police from Kampala City; two Community Development Officers from Hoima District and Kabarole Districts. It should be noted that the study was conducted at the height of COVID 19, therefore, has a number of limitations. Because of the lockdown and social distancing, we could not carry out face to face interviews in the communities. ; Therefore, the voices of the GBV survivors are not presented. Additionally, given the limited timeframe to conduct the study, we only accessed a few key informants to give an indication what is going on in their areas. Most of the persons involved in the management of COVID 19 were not available to discuss issues of COVID-19. Nevertheless, the study draws important links between gender-based violence and COVID-19, makes important conclusions and recommendations for the health sector, disaster preparedness, Ministry of Internal Affairs, Ministry of Gender, Labour and Social Development, among others.

## The Global Pandemic of COVID-19

In December 2019 a novel coronavirus (COVID-19) emerged in Wuhan, China. By February 2020 the virus had spread to over 150 countries across the global, and as of March 11, 2020, the World Health Organization (WHO) declared the outbreak a global pandemic <sup>7</sup>. Citing concerns with “the alarming levels of spread and severity,” the WHO called for governments to take urgent and aggressive action to stop the spread of the virus <sup>8</sup>. Globally, as of 14th April, 2020, 1,873,265 cases of COVID-19 had been reported, including 118,854 deaths<sup>9</sup>. Africa had 15,292 cases and 835 deaths, with most cases and deaths occurring in countries like South Africa, Egypt, Algeria, Morocco, and Burkina Faso; Asia had 307,569 cases and 11,269 deaths, with most cases and deaths in countries such as China, Iran, Turkey, and Indonesia; America had 676,116 cases and 27,414 deaths with United States (582, 594 cases and 23,649 deaths), Canada (25,663 cases and 780 deaths), while Brazil (23,430 cases and 1,338 deaths); and Europe had 865,918 cases and 79,252 deaths, with more cases and deaths in Spain, Italy, France, UK and Belgium <sup>10</sup>. The graph below shows a distribution of the pandemic globally.

### Distribution of COVID-19 cases worldwide, as of 14 April 2020



**Source: European Centre for Disease Prevention and Control accessed at <https://www.ecdc.europa.eu/en/geographical-distribution-2019-ncov-cases>**

<sup>7</sup>Human Rights Watch, 2020. What is Human Rights Watch doing? Follow our reporting on the impacts of COVID-19 at: <https://www.hrw.org/tag/coronavirus>, accessed on 2nd march 2020

<sup>8</sup>Ibid

<sup>9</sup>European Centre for Disease Prevention and Control accessed at <https://www.ecdc.europa.eu/en/geographical-distribution-2019-ncov-cases> as of 14th April, 2020

<sup>10</sup>Ibid

## Covid-19 Lockdown in Uganda

In Uganda, as of 15th April, 2020 had 55 cases but with no death, with the first case having been reported on March 15<sup>11</sup>. Like many other countries, on 18th March 2020, Uganda responded by enforcing a lockdown of the country as an emergency management plan to contain the spread of the virus up to 13th April but again extended the lockdown up to 5th May, 2020. This included closure of institutions of higher learning, schools, places of worship, shopping centres and daily markets, among others. In addition, all in-coming and out-going flights were halted including banning public transport and private vehicles from operating. Public mobility was restricted from 6am to 7pm, and any person suspected of having the virus was put under isolation for monitoring or treatment. The only spaces left to operate were of course health facilities and the food markets.

Whereas the lockdown was meant to control the spread of the virus, on the other hand, it also created anxiety, fear and uncertainty in the population. Uganda has a youthful population of 70% and the majority of whom are unemployed. Besides, the majority of the population in Uganda live from hand to mouth, thus, the need for survival (getting what to eat) during the lockdown created potential for conflict and violence not only in families but also in the communities. Within two weeks of the lockdown cases of gender-based violence had started to be reported and violence in general between security and the masses too escalated. This paper, however, restricts itself to explaining the relationship between covid-19 shutdown and GBV among women and men in homes rather than with the security forces.

## Meaning of Gender Based Violence

The Interagency Standing Committee Task Force on Gender and Humanitarian Assistance defines GBV as a

*...term for any harmful act that is perpetuated against a person's will and that is based on socially ascribed (gender) differences between males and females.<sup>12</sup>*

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<sup>11</sup>Ibid

<sup>12</sup>Inter-Agency Steering Committee (IASC). 2005. Guidelines for Gender-Based Violence Interventions in Humanitarian Settings: Focusing on Prevention and Response to Sexual Violence in Emergencies. (Field Test Version). Geneva, Switzerland: IASC.

Similarly, a report by UNFPA (2010) defined GBV:

*as violence perpetrated against a person without her or his consent based on her or his gender role, responsibilities, expectations, privileges and limitations. It is gender-based violence because survivors are targeted due to their gender or roles in society; it is physical, mental, or sexual abuse – including acts, attempted or threatened, committed with force, manipulation, or coercion and without the informed consent of the survivor – directed against a person because of his or her gender in a society or culture.*<sup>13</sup>

Although it is difficult to pin-point which of the forms of violence are happening amidst the covid-19 lockdown, some or even all the forms indicated in the above definitions are possible. What however, has come out prominently and reported in the media is violence which is physical and one which has resulted into deaths of some victims. Because of the invisible nature of some forms of GBV, this hampers communities' response to the pandemic generally, and to cases of GBV specifically as they may not be seen as an urgent case. Cases of rape and defilement will go without being addressed, further disadvantaging the women and the girl children. In case of pregnancies resulting from rape and defilement – these will make women and the girl children further vulnerable and put them in a precarious state.

## **GBV Prevalence in the Wake of Covid-19 in Uganda**

The enormity of GBV during this crisis of covid-19 shutdown has been noted by a number of agencies and media across the globe. The media and police in Uganda have reported an increase in the number of cases of GBV in the country due to the covid-19 lockdown. For instance, the Independent, a local magazine of 16th April 2020 reported that police had far recorded 328 cases of domestic violence since the COVID-19 lockdown<sup>14</sup>. The magazine also reported that 102 cases of child neglect had been recorded by police. All the key informants were of the view that GBV has increased although they did not have actual figures. For example:

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<sup>13</sup>UNFPA 2010, understanding GBV in emergencies; participant Manuel, UNFPA Pakistan, November, 2010

<sup>14</sup>The Independent, 16 April 2020 accessed at independent.co.ug

*GBV is on the rise country wide, both in rural and urban centers due to COVID 19, a lot more is also happening indifferent part of the country including the Acholi-sub-region which may call for intervention. ... COVID 19 lock down effect differs in a sense that, within the urban center people tend to keep quiet over GBV information due to fear and shame. And to that effect, the UrbanGBV affected households may suffer more quietly through experiencing psychological and economic violence. Remember, that many people country wide lost their temporal source of daily income activities due to COVID 19 Lock down which prompted many people to re-adjust economically in order to meet high cost of living in their respective households. These unexpected changes coupled with the implementation of the presidential directive on COVID 19 (country lock down) have led to covert or overt GBV across the country.*

***Female Resident, Bukasa Village Kirinya Kampala***

*Due to the effects of COVID 19 Lockdown, physical, economic, social and emotional violence are on the rise and very common in our communities. Women are experiencing increased violence from their spouses; they either separate or divorce their spouses to escape from the violence.*

***Male Local Councilor Olam Village, Odek Sub-county, Omoro District.***

The Local Councilor Amuru noted with sadness that already seven women had divorced their husbands since the COVID 19 Lockdown. Coincidentally, the same number (7) of women divorcees was reported by the Councilor from Omoro district. The Councilors further indicated that the current divorces are mainly initiated by women. Whereas in Hoima District, the Community Development Officers reported that the men were instead sending away their wives amidst increases in GBV:

*... GBV has increased in the district, middle income and the regular person they are all facing GBV. People are now idle; they have nothing to do. People did not have side initiatives that would keep them busy. The man and women sit at home and look at each and any small disagreement ends in GBV*

***Male Community Development Officer, Hoima District***

The same sentiment was voiced by the female Journalist with the NewVision Newspaper that any slight misunderstanding between spouses and which they would normally solve amicably now they just fight. She gave an example:

*Covid 19 is affecting everyone, a police officer in one of the suburbs of Kampala – Kinawataka fought with the wife, shot the step children and shot himself.*

**Female Journalist, New Vision Newspaper**

The effects of Covid-19 have not left anyone behind, security personnel, middle income peoples, the girl children are heavily affected because rates of defilement were reported on the increase in Hoima District which is likely to be the case in other districts as well. The increases in GBV are heightened by unequal power relations between men and women and because women are economically disempowered which renders them vulnerable.

Uganda is not alone in this; all other countries that instituted Covid-19 Lockdown are reporting increased GBV cases. For example, Paterman et. al<sup>15</sup> cited Wan Fei report of China's Jianli County (central Hubei province), which had reported 162 cases of violence for the month of February. The authors indicate that these cases were three times the number reported in February 2019 and 90% were attributed to Covid-19. A brief by UN Women titled Covid-19 and ending violence against women and girls noted an increase in statistics of GBV particularly violence against women since the outbreak of COVID-19 across the global as security, health, and money worries create tensions and strains accentuated by confining people at home<sup>16</sup>. Similarly, the New York Times, noted an increase in data of domestic abuse created by the pandemic<sup>17</sup>, just as Bryant, writing for Voice of America, reported "(a)cross Europe, ... coronavirus-triggered lockdowns ... is creating fertile ground for deepening domestic violence".<sup>18</sup> A tweet by the United Nations secretary general, stating that "(m)any women under lockdown for #COVID19 face violence where they should be safest: in their own homes," adds to the reality of the enormity of GBV.

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<sup>15</sup>Peterman A., A. Potts, M. O'Donnell, K. Thompson, N. Shah, S. Oertelt-Prigione, and N. van Gelder (2020). Pandemics and Violence Against Women and Children. Working Paper 528. Washington, DC: Center for Global Development. <https://www.cgdev.org/publication/pandemics-and-violence-against-women-and-children>; <https://plato.stanford.edu/entries/feminist-power/>

<sup>16</sup>UN Women, 2020. Covid-19 and ending violence against women and girls

<sup>17</sup>Amanda Taub, A New Covid-19 Crisis: Domestic Abuse Rises Worldwide, the New York Times, April 6, 2020 accessed at: <https://www.nytimes.com/2020/04/06/world/coronavirus-domestic-violence.html>

<sup>18</sup>Lisa Bryant, As Coronavirus Spreads Across Europe, So Does Domestic Violence, April 10, 2020 accessed at <https://www.voanews.com/science-health/coronavirus-outbreak/coronavirus-spreads-across-europe-so-does-domestic-violence>

Citing media outlets across the world, the UN Women brief further noted that in France, cases of domestic violence increased by 30 per cent since the lockdown on March 17<sup>19</sup>; while helplines in Cyprus and Singapore<sup>20</sup> registered an increase in calls by 30 per cent and 33 percent, respectively<sup>21</sup>. In Argentina, emergency calls for domestic violence cases increased by 25 per cent since the lockdown started<sup>22</sup>. In Canada, Germany, Spain, the United Kingdom<sup>23</sup>, and the United States<sup>24</sup>, government authorities, women's rights activists and civil society partners also indicated an increase in reports of domestic violence during the covid-19 crisis and increased demand for emergency shelter.<sup>25</sup>

These cases highlight and reinforce the importance of appreciating the relationship between health epidemics, pandemics and GBV, and hence the need to be prepared to minimize its causes. However, the records only indicate the number of cases reported without informing the reader the forms they are manifesting. Despite this gap, the increase in the cases buttress the case of the relationship between health pandemics and GBV. Highlighting the gravity of covid-19 shutdown and GBV, a statement by Singano on the Oxfam's blog is worth noting:

*"(e)veryone is being asked to stay home and be safe, but one thing that everyone has forgotten is that homes are not safe for women<sup>26</sup>. "...governments are making huge assumptions that homes are safe. I have to disappoint them: homes are not safe for women; we know the facts<sup>27</sup>."*

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<sup>19</sup>"Domestic violence cases jump 30% during lockdown in France" <https://www.euronews.com/2020/03/28/domestic-violence-cases-jump-30-during-lockdown-in-france>, accessed 3rd April 2020

<sup>20</sup>"Commentary: Isolated with your abuser? Why family violence seems to be on the rise during COVID-19 outbreak", <https://www.channelnewsasia.com/news/commentary/coronavirus-covid-19-family-violence-abuse-women-self-isolation-12575026>, accessed 2nd April 2020

<sup>21</sup>"Lockdowns around the world bring rise in domestic violence" <https://www.theguardian.com/society/2020/mar/28/lockdowns-world-rise-domestic-violence>, accessed 3rd April 2020

<sup>22</sup>"During quarantine, calls to 144 for gender violence increased by 25%" [http://www.diario21.tv/notix2/movil2/?seccion=desarrollo\\_notia&id\\_notia=132124](http://www.diario21.tv/notix2/movil2/?seccion=desarrollo_notia&id_notia=132124), accessed 2nd April 2020

<sup>23</sup>"Coronavirus: I'm in lockdown with my abuser" <https://www.bbc.com/news/world-52063755>, accessed 3rd April 2020

<sup>24</sup>"Domestic violence cases escalating quicker in time of COVID-19" <https://missionlocal.org/2020/03/for-victims-of-domestic-violence-sheltering-in-place-can-mean-more-abuse>, accessed 3rd April 2020

<sup>25</sup>"Lockdowns around the world bring rise in domestic violence" <https://www.theguardian.com/society/2020/mar/28/lockdowns-world-rise-domestic-violence>, accessed 3rd April 2020

<sup>26</sup>Mwanahamisi Singano How to stop Coronavirus Lockdown Leading to an Upsurge in Violence Against Women, accessed at <https://oxfamblogs.org/fp2p/how-to-stop-coronavirus-lockdown-leading-to-an-upsurge-in-violence-against-women%ef%bb%bf/>

<sup>27</sup>Ibid

It is very important to remember that men have been used to working in the public sphere where they spend at times 10 hours or more. When they come home to the realities of the women's reproductive roles, they do not know how to handle themselves. The women on the other hand, as the managers of the home under normal circumstances they would make do with what is available, but because now the husband is at home she points out what the family needs. The women feel like can download their regular worries on the man. This causes stress and frustration on the side of the man and is powerless, and then thinks the wife is unfair to him. Of course this escalates the conflict/misunderstanding.

## **The Relationship between GBV and Covid-19**

The relationship between GBV and Covid-19 is assessed through following linkages: Economic insecurity and poverty-related stress; Quarantines and social isolation, Inability of women to temporarily escape abusive partners; Stigma of partner being positive, Social network, Non-operational support services, and trivialization of GBV as a non-priority.

## **Gender Inequality, Economic Insecurity and Poverty-Related Stress**

Gender inequality, economic insecurity and poverty related stress were mentioned as important in the relationship between GBV and Covid-19. Key informants reported that some women are leaving their marital homes because of economic violence—their husbands are not able to provide food for the family because of the lockdown. Some women who did not have food and those who got suspicious or scared of possibly being beaten/killed by their chaotic husbands have walked out of their marriages or opted for divorce amidst household quarantine:

*Covid 19 has brought conflict in families; women are leaving their marital homes. In our area seven women have left marital homes since the lockdown because the men do not have money to buy food for the family. The lack of food leads to verbal abuse and eventually ended in physical violence. ...*

**Male Local Councilor for Turodekatuba Village, Amuru Sub-county, Amuru District**

Similar cases we reported in Omoro District:

*A woman from my village was jailed at Police Station due to child neglect since she had abandoned a breast feeding baby to her husband. She even assured the police that, she is no more interested to continue with her marriage due to what she referred to as unbearable poverty in her household.*

**Male, Local Councilor, Olam Village, Odek Sub-county, Omoro District.**

The lockdown, quarantine/confinement is not a normal routine for people. All the key informants indicated that people are not happy because the lockdown creates an environment which is a fertile ground for a number of factors to incite violence. With the lockdown people feel lost and when these variables interact with financial strains, it is not a favourable state of mind for a man. As the female key informant highlighted that “a man without money for providing for the family becomes aggressive and their relationship becomes sour, when a woman asks for money. He feels his masculinities are being challenged”. In addition, to the patriarchal nature of the family in Uganda, the man thinks what he says goes, the wife should not talk back, question him or put him on pressure for food, water, soap, etc. To defend his status, the man has to fight back.

The above voices are supported by literature on linkages or relationship between GBV and other health emergencies such as Ebola and Zika viruses in east and central Africa and west Africa. For instance, studies by IRC (2019)<sup>28</sup>, ODI (2016)<sup>29</sup> and IFRC and RCS (2015)<sup>30</sup> noted relationship between cases of GBV and the outbreak of Ebola and Zika virus in west Africa and central Africa. It is not surprising therefore that Yaker and Erskine (2020)<sup>31</sup>.

<sup>28</sup>IRC, 2019, Rapid assessment on gender and violence against women and girls in the Ebola outbreak in Beni, DRC

<sup>29</sup>ODI (Overseas Development Institute) 2016. Disasters and violence against women and girls: Can disasters shake social norms and power relations? November, 2016

<sup>30</sup>IFRC & RCS (International Federation of Red Cross and Red Crescent Societies), Geneva, 2015: Unseen, unheard: Gender-based violence in disasters: Global study

<sup>31</sup>Yaker R and Dorcas Erskine, 2020. GBV Case Management and the COVID-19 Pandemic, The GBV AoR Help Desk

However, the relationship between health related emergency situations and even in natural related disasters and the rise in cases of GBV, do not constitute causation; that is, health related emergencies or disasters related situations are not the cause of GBV. Rather, such situations simply act as catalyst of the relationship. Studies by UNFPA (2020), IFRC and RCS (2015), and ODI (2016) have noted that the actual cause of GBV during these outbreaks is a function of preexisting gender inequality which get reinforced and aggravated during emergency or disaster situations. ODI (2016) for instance, noted that disasters/emergency situations affect social relations. Whereby on one hand, emergency situations may catalyze family and community bonds and solidarity to cope and recover from the situation. While on the other hand, may catalyze an aggravation of pre-existing gender inequalities such as violence against women and girls. In most cases, however, emergency related situations tend to lead to the latter relations, where women and girls are subjected to various forms of violence due to their vulnerability.

In the context of covid-19 and increase in cases of GBV, the UNFPA (2020) noted that during this COVID-19 pandemic, where movement is restricted and people are confined, women and girls are at greater risk of experiencing gender-based violence<sup>32</sup>. This is partly because in the event where man is the sole breadwinner, he may feel pressure in the face of economic hardship resulting from the outbreak and the inability to work, causing tensions and conflict in the household, and possibly leading to violence<sup>33</sup>. Although such violence may be triggered by the pressure and tension of failure by the man to provide for the family during this lockdown, the act of violence is generally a manifestation of the power imbalance between men and women.

It is therefore possible that the reported cases of GBV in various parts of Uganda, as the voices of Key Informants, media outlets and other studies are reporting are due to the fact the economic impact of COVID-19 resulting from the widespread closure of businesses and industries has put increased financial strain on communities, particularly in segments of the population that are already vulnerable<sup>34</sup>.

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<sup>32</sup>UN Women, 2020. Covid-19 and ending violence against women and girls

<sup>33</sup>Ibid

<sup>34</sup>Ibid

Women who depend on men for their livelihoods or housewives for that matter, and those who disproportionately work in insecure, lower-paid, part-time and informal employment, with little or no income security and social protection, are more vulnerable to abuse from their male partners or other male relatives<sup>35</sup>. Economic pressure leading to GBV in other health related epidemics have been reported in countries where cases of Ebola and Zika outbreaks happened such as Liberia, Central African Republic and DRC.

*“there has been a spike in cases of domestic violence since the lock-down was instituted. Due to the isolation regulations being enforced, women are forced to stay in homes with abusive partners and are at risk of being severely harmed or even killed. In these situations, women cannot seek recourse with the authorities or seek shelter elsewhere because they are not allowed to move”.*<sup>36</sup>

Whereas the measure to stay home would presuppose that men would assist their wives while at home with household chores, instead it is cases of GBV being reported. Under such situation of lockdown, the questions that we would be typically asking are whether men staying home benefit women by sharing on women’s traditional roles at home; whether it reduces their workload and improves their control over resources and their power in decision-making processes, unfortunately in the circumstance that seems not to have happened in households reporting GBV.

Instead, it appears that limits on mobility imposed by the lockdown have forced people to spend much more time together at home, which means that any slight provocation by one of the spouse is bound to lead to domestic abuse<sup>37</sup>. Under these circumstances, it is possible that Covid-19 is creating some harsh living conditions for some community members, and for others, the pandemic has heightened the misunderstanding/conflicts between couples/partners leading to GBV.

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<sup>35</sup>Ibid

<sup>36</sup>Akina Mama waAfrikaThe Gendered Implications of COVID-19, accessed at <https://www.akinamamawaafrika.org/the-gendered-implications-of-covid-19/>

<sup>37</sup> Federico Rios, A New Covid-19 Crisis: Domestic Abuse Rises Worldwide, the New York Times, <https://www.nytimes.com/2020/04/06/world/coronavirus-domestic-violence.html>

In the same vein O'Donnell noted that when family members are in close proximity under conditions of duress for extended periods of time, rates of violence against women and children are bound to be high<sup>38</sup>. Quarantine also increases face-to-face exposure to perpetrators and can reinforce abuse tactics of social isolation<sup>39</sup>. This is further worsened if such people have been experiencing domestic violence before, such that mandatory lockdowns to curb the spread of COVID-19 have trapped them in their homes with their abusers, isolated from the people and the resources that could help them.<sup>40</sup>

## Stigma of partner being positive

Besides, it is possible that GBV can be incited by suspected COVID-19 positive spouses/partners who are quarantined in the home. The suspected partner is already stressed by the thinking that he might be positive, and if positive, he is not sure whether he will recover or not. This might lead to verbal abuse of the spouse who is mostly the woman taking care of the quarantined person. In Uganda there have been stories of stigma against those suspected of having covid-19, just as those who have HIV/AIDS.

## Social network

The other cause of GBV especially in the current state of covid-19 lockdown is that mitigation measures of staying home and maintaining social distance, broke down social networks and systems that men and women use not only sometimes for economic survival in normal times but also protect themselves against GBV. According to Singano:

*"...in Africa, social capital is often used to manage crises especially of this nature. As countries went into lockdown, all that is needed is more humanity, more emotional connection, support, more hope and inspiration. And technology which allows us to offer 'social support' and stay socially connected with less physical contact, physical distancing' should also address physical violence, which women and girls have been experiencing in their private spaces."*<sup>41</sup>

<sup>38</sup>O'Donnell M, Amber Peterman & Alina Potts, A Gender Lens on COVID-19: Pandemics and Violence against Women and Children, April 3, 2020 accessed at <https://www.cgdev.org/blog/gender-lens-covid-19-pandemics-and-violence-against-women-and-children>

<sup>39</sup>Ibid

<sup>40</sup> As Cities Around the World Go on Lockdown, Victims of Domestic Violence Look for a Way Out, <https://time.com/5803887/coronavirus-domestic-violence-victims/>

<sup>41</sup>Mwanahamisi Singano How to stop Coronavirus Lockdown Leading to an Upsurge in Violence Against Women, accessed at <https://oxfamblogs.org/fp2p/how-to-stop-coronavirus-lockdown-leading-to-an-upsurge-in-violence-against-women%ef%bb%bf/>

## Non-operational support services, and trivialization of GBV as a non-priority

The other contributing factor especially in the case of Covid-19 shutdown is the fact that organizations that handle GBV in Uganda are also affected by the lockdown. Apart from the police, none of such organizations are operationally, hence tracking down of cases is equally affected.

Highlighting the dilemma of closure of institutions that handle cases of GBV, O'Donnell (2020) argued that "with quarantine measures imposed and stress heightened, women are at increased risk of violence committed by their partners and family members, and essential support services are absent".

In this event that essential support services are absent, some of the solutions that have been offered by some government officials including the police and the president are equally disappointing. For instance, when cases of the escalation of GBV were brought to the attention of the president, on March 31st when he was addressing the nation, he casually dismissed domestic violence, when he stated:

*"The guidelines are simple, you either respond to health or childbirth, we are not dealing with all problems, that some are drunk and has beaten his wife if you ring me and I am on duty, I will say you finish that one from there,".*<sup>42</sup>

Interpreting such a response, Singona noted that, it is comparable to permission granted for all abusers in Uganda to go ahead and hit their wives, after all, there is no consequence of such violence. At a deep level, however, such a response illuminates the patriarchal nature and spirit with which domestic violence tends to be handled especially by the male dominated leadership. If at the leadership level domestic violence can be dismissed, it means it is not worthy the attentions with which the activists demand of it. In almost the same measure of trivializing the issue of GBV, Wabwire (2020), for example, "a senior police officer was quoted by The New Vision blaming women for being victims of sexual violence instead of taking on the men responsible for the violence and abuse, ... a former police spokesperson, went on a tirade against women".<sup>43</sup>

<sup>42</sup>Ibid

<sup>43</sup>The New Vision, 17th January 2020

## Conclusion

This study aimed at assessing the relationship between gender based and Covid 19, and from the literature reviewed on the link between GBV and Ebola, Zika and HIV virus epidemics there exists a silent relationship between gender based violence and covid-2019. This relationship has been strongly linked to Covid-19 lockdown, quarantine and social isolation of families that create tensions between the spouses/partners. These tensions are mostly related to the man's economic provisioning role. The majority of Uganda population do not earn a monthly income, since there is no working due to the Corona 19 lockdown the families are economically constrained that lead to quarrels and may escalate into fighting.

For example, food and livelihood insecurities resulting from the lockdown is possible to have increased social tensions between family members. Besides, the low social status and/or loss of income and social support of many women following the lockdown has made them a target of violence because perpetrators know such women are less likely to report abuse or seek assistance, in the context of covid-19 lockdown where even agencies that handle cases of GBV are closed. In Uganda the social media particularly WhatsApp, Twitter and face book have been showing cases of gender based violence.

More specifically the study traced the relationship of Covid-19 and GBV through prevalence of GBV and indeed it has been shown that GBV increased in the months of March and April 2020 than in the same months last year. We also examined the causes of GBV, we conclude that GBV is caused by underlying causes such as pre-existing gender inequalities in which Covid-19 pandemic aggravates such underlying situation which then matures into GBV. For this reason, GBV should be elevated to the same status of priorities during crises such as health pandemics.

## Policy Implications and further research

As noted above, this study was conducted at the height of COVID 19 where the lockdown meant that the people were confined at home and ensure social distancing, hence face to face interviews in the communities and the voices of the GBV survivors, were not possible. Besides, given the limited timeframe to conduct the study we only accessed a few key informants. Nevertheless, the study draws important conclusions and recommendations as indicated below:

- *The increase in cases of GBV during this time of COVID 19 Lockdown, calls for the responsible government ministries and agencies (such as the Ministry of Internal Affairs (security organs) with support from the Ministry of Gender, Labour and Social Development) to prioritize measures to address cases of gender based violence. In such cases GBV should either be addressed on its own right or should be elevated to the status of priorities to be addressed during public health crisis and resourced accordingly.*
- *We recommend gender sensitization of communities on gender based violence and its effects especially in situations of health related emergencies; train Local Defense Units (LDUs) so that they are able to identify cases of GBV and how to handle them. This would put less strain on the police in cases of emerging diseases/pandemics.*
- *The majority of the fights are heightened by limited finances on part of the men to fulfill their provisioning roles, we recommend that these households should be identified and provided with food. In addition, we recommend that in such households the food should be given to women because she is best experienced how to handle it. To avoid escalated acts of GBV after distribution of food, the exercise should be preceded by sensitization of communities as to why the food is distributed to women. This exercise can be conducted by the local leaders in the communities and those mobilizing communities to receive the food items.*
- *The government has received a lot of resources –cash and pledges, some of these resources should be channeled to addressing GBV at all levels – Addressing structural issues for example village organizing communities should have 50% / 50% female /male representation.*

- *Access to health services by GBV survivors was already unsatisfactory due to the survivor's financial status, knowledge of procedures, and social cultural norms. This is expected to be heightened during covid-19 lockdown.*
- *This work also agrees with O'Donnell's recommendation which calls:for encouraging of informal (and virtual) social support networks. Within the contexts of pandemics, there are a number of options to scale-up and leverage existing online and virtual platforms for online support networks. In settings without options for online platforms, options for text-based (i.e.,WhatsApp) networks can be encouraged, building on existing women's groups and collectives.*
- *It is important to provide women with a platform where they can air their views and concerns about covid-19 and GBV.*
- *After COVID 19 it would be important to conduct an extended study of the link between GBV and COVID-19 focusing on community experiences and response. This would trace the women's coping strategies and any community structures used for interventions/arbitrations.*
- *Another study can explore increases cases of defilement – the girl child continues to be vulnerable.*
- *On the key findings that the government normally addresses the technical component of the pandemic, we recommend that interventionprogrammes for Covid-19 should have a social aspect in which the social needs of women and men are addressed.*
- *Finally, combining qualitative and quantitative research methods will help to describe the context and scope of the problem.*

## About the Authors

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## Disclaimer

**The views expressed in this paper do not necessarily reflect the views of KAS but those of the authors.**