COVID-19 Crisis and Women in Asia
Learning from feminist responses

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Executive summary

This report looks at feminist responses to the COVID-19 pandemic from grassroots organisations across countries in Asia. Overall, owing to various factors, the responses to the pandemic have been predominantly masculinistic – lockdowns were enforced brutally in many places, caring responses were inadequate, and a sense of coercion was felt having to abide by these often untenable instructions. In response, grassroots organisations mobilised to alleviate the hardships faced by many, especially by women. We use a feminist intersectional approach in reflecting on some feminist responses to the pandemic in Asia, with a focus on India, Indonesia, Malaysia, Nepal, the Philippines, and Vietnam.

This report focuses on three groups of women: women migrant labourers, healthcare workers, and women entrepreneurs. These groups are crucial for post-pandemic rebuilding efforts but were largely ignored during the early stages of the crisis. In identifying the feminist grassroots organisations’ responses to alleviate the challenges faced by these three groups of women, we have identified seven feminist approaches – acting with urgency, knowledge generation and creation, providing invisible infrastructure, collectivisation, acting as intermediaries, following a praxis of care and being practical – which enabled effective response in the face of an unprecedented challenge. All organisations have demonstrated one or more of these approaches in their responses while one can assume that these approaches are common to all organisations. Based on an analysis of these feminist responses, the report also draws some lessons to be learned for post-pandemic reconstruction. These lessons are clustered around four areas of action: identifying marginalised groups, identifying decision-makers, identifying alternatives, and identifying potential policies to be promoted to remedy negative impacts. These four areas are, of course, relevant in the context of any crisis response and reconstruction effort, and not only in the case of the COVID-19 pandemic.

We conclude with recommendations for policymakers and other decision-makers to recognise the role of women’s organisations in providing informal safety nets, improving the conditions for not-for-profit workers, increasing their access to resources and including them in relevant decision-making process. This report is a celebration of feminist responses that have shown what a just and equitable world can look like even at the bleakest of times. This report is also a recognition of the resilience shown by Global South activists and workers to change the narrative prevalent in the Global North that women in the Global South are predominantly victims of injustice.
Introduction

All over the world, the COVID-19 pandemic has disrupted the lives of the most marginalised. While the wealthiest accrued more wealth, it was the poorest that horrible losses (Chen and others, 2021). Even among those who were badly affected by the virus as well as the resulting closures and lockdowns, a hierarchy of distress became apparent. The ones who were already on the margins of safety and stability were pushed further behind and it became clear that the pandemic did not affect everyone equally. Women especially paid a bigger price in the face of the pandemic. For example, increasing household chores meant that women have had to cut back their hours at work at all levels. Many women lost their jobs or had their salaries cut as women are over-represented in most informal and low-paying job sectors. In addition, women’s care burden increased – both as healthcare workers, again a highly feminized workforce, and at homes as they took care of husbands, elderly in need of support or children who needed attention and care. Women were also subjected to rising levels of domestic violence, which turned out to be an ‘unforeseen’ circumstance and a shadow pandemic (Alqaseer and others, 2021; Krishnakumar and Verma, 2021). Challenges facing women were exacerbated by the pandemic, be it single mothers, married women, cis-gendered or gender diverse, young, middle-aged or old women, and those on different sides of the power spectrum.

In a previous study, we argued that one of the main reasons why these problems were augmented especially for women and other gender minorities is because those who are holding power, politicians and other policymakers, operated from a myopic vision with limited awareness of the diversity of people and their concerns (Rahmadhani and others, 2021). However, in response to these problems, especially in terms of decision-makers’ narrow visions of what is acceptable and enough for people, it was feminists and grassroots organisations that came to the rescue. With their foresight, and knowledge of how policies have worked for the helpless over the years, they understood quite clearly what impacts would unfold and how to respond to the needs, even though in many instances they had to act in urgency. In doing so, feminist organisations came to the aid of people, who were forced to respond to an emergency mounted on them in addition to their daily life struggles.

Against this background, this paper reflects on some feminist responses to the pandemic in Asia. The goal of this study is threefold:

**Highlight, record and celebrate the work done by feminist grassroots organisations in Asia**

It is imperative that we celebrate the work done by feminist grassroots organisations in the Global South, especially in Asia, as Asian countries were badly affected by the pandemic. Although some of the countries in the Global North have been in the media glare for mismanagement, there has been an optimistic reporting regarding their response. For example, a victorious coverage of their vaccine creation (for example in the United Kingdom), or their joyous resilience in the face of the virus (Italy), or their procurement and speedy vaccine supply and distribution (USA). There are several responses made by Asian countries that have been exemplary, be it quick containment (Vietnam), enforcing mask wearing and social distancing norms (South Korea and Japan), strict contact tracing and humane response to migrant labourers (Kerala in India), use of effective math models to contain the spread of the virus (Maharashtra in India during the second wave) or even fair and dignified welfare systems for women labourers (Bangladesh). These responses from Asian countries contrast with the responses of the Global North, especially UK, US and Europe’s hoarding of vaccines and limiting the access to life saving vaccines.

In response to immediate measures of the vaccine rollout and prevention of virus containment, grassroots feminist organisations have been able to voice their concerns. Wherever government responses have fallen short in meeting the needs of the disenfranchised, feminist groups have rallied to provide support. In doing so, they have exemplified how their context-specific knowledge and extensive work experience in the field of justice are suitable for local conditions and mindful of the differences they operate with. Thus, they need to have a seat at the table when recovery and building back is being discussed. In the interim, though, their work needs to be documented and celebrated.
Identify patterns in their responses and extract learnings for future responses

A factor that was reiterated by several feminist organisations during the pandemic – be it in their work in prevention of violence, supporting migrant labourers, providing aid to sex workers, vaccine distribution or implementing safety protocols – was that they already knew these challenges would arise (Rajagopalan, 2020). Feminists had foreseen that lockdown would be fertile ground for domestic violence, that school closures would result in disproportionate and prolonged losses to girl students as compared to boys and that it would widen the achievement gap. Feminist organisations understood that there would be a reduction in women’s labour force participation, that healthcare workers would be at the receiving end of people’s ire or misinformation could spread in times of crisis. All this knowledge and foresight is a result of years of work and engagement with feminist movements from all over the world. According to Bradshaw and Fordham (2015), women and others who are vulnerable are more likely to know how to tackle challenging situations as their lives are built around these challenges. Masculinist responses are not new to feminist activists or grassroots workers. Their engagement with history, theory and movements allows them to provide a framework or path that others can use, especially if they would like to respond to challenges of the most marginalised. Hence, we have identified the patterns in these feminist responses and juxtaposed it to feminist historical struggles to demonstrate the continuity of their work.

Identify what space those in power should be making for feminist organisations as we move towards building a post-COVID world

Keeping in mind that the work of feminist organisations needs to be documented and their long-term engagement with the most vulnerable needs to be respected and used as the world opens up again and moves forward, it is imperative that feminist grassroot organisations have a significant say at any decision-making table. In the past, during disasters and crises – whether human made or natural – women’s and feminist grassroot organisations have played a role in ameliorating their challenges. This was seen during the tsunami of 2004 (Tsunamika, n.d.), earthquake in Nepal in 2015 (Sthapit, 2015), repeated ebola virus outbreaks in various African countries (WHO, 2019b) and even fights against unjust laws and legislatures like in the case of protest against the amendment of Citizen Act in India. The students protest in Hong Kong and other post-conflict peace efforts in Aceh and Ambon in Indonesia, Nagaland and Kashmir in India or even Mindanao in the Philippines are some other examples of instances where local women organisations played such roles. Women’s groups are best placed to visualise change and improve life for the most marginalised. Women’s presence in committees or any other decision-making or participatory implementation processes, has led to successful outcomes. This success is attributed to women often being on the margins and knowing the costs associated with being ignored or undervalued. Due to all these factors, it is essential that women and other gender diverse people are included in decision-making positions.

This study centers on exploring approaches of feminist organisations that have been used to assert their agency for their community’s survival amidst the COVID-19 pandemic. By acknowledging these approaches, we gain an understanding on how they have been able to move beyond survival and embody what values of feminism are: that of solidarity based on compassion and negotiating power based on the feminist realities on the ground. The research focuses on the work done by organisations for women migrant labourers, healthcare professionals and entrepreneurs, while keeping intersecting identities in mind. These intersectional identities might provide privilege to women in some cases and might hinder them in others. We examine the roles of thirteen feminist organisations in India, Indonesia, Malaysia, Nepal, the Philippines, and Vietnam.

We use a qualitative method of desk reviews to understand the diverse feminist responses. Intersectional feminism is based on the concept of intersectionality which highlights “the need to account for multiple grounds of identity while considering how the social world is constructed” (Crenshaw, 1991). Intersectional feminism builds the analysis on the structural, political, and representational dimension of intersectionality, including how systems of race, gender and class domination converge and affect the marginalisation of women and others. At the policy making level, this means taking into consideration multiple disadvantages to improve societies’ conditions and protect the people from the impact of the pandemic. This also means that solutions must be driven by or influenced by those who are affected the most, and gain most from the community’s recovery and resilience. In this case, women from diverse backgrounds at the grassroots level.
In the following chapter, we will move on to describe the work of grassroots feminist organisations and their approaches that can be replicated in the post-COVID world. These approaches are embedded in historical feminist struggles to highlight how women and other feminists’ knowledge and experiences of struggles against harsh realities can be used to mitigate future problems or in other words: “why do we not listen to experts when we should?” (Rajagopalan, 2020). We conclude with some recommendations for how those who occupy positions for making or demanding change can make space for the experts from these organisations and at the very least, adopt some of these feminist principles while the post-COVID future takes shape.
Gendered impacts on migrant labourers, healthcare workers and entrepreneurs

This report sets out to explore the role of women change makers in supporting diverse challenges faced by vulnerable communities in three hardest-hit economic sectors: labour migration, healthcare, and entrepreneurship. Labour migration is defined as the movement of a person to another country for the purpose of employment other than on her/his own account (ILO, 1999). International Organisation for Migration (IOM) differentiates several sub-groups of migrant workers, including business travellers, contract migrant workers, established migrant workers, highly skilled migrant workers, immigrating investors, project-tied workers, seasonal migrant workers, and temporary migrant workers (Simon and others, 2015). Migrant workers contribute to growth and development in the host countries and support the economy of their country of origin, through remittances and creation of business and trade networks. However, complex challenges remain in terms of governance and migrant workers’ protection. Many migrants continue to experience numerous problems, particularly those who are in precarious working conditions, such as female domestic workers and low-skilled workers. This also includes undocumented migrant workers who often face multiple injustices and are denied access to support and protection due to their legal status (ILO, 2021).

Response measures, including lockdowns and border closures, at times of the COVID-19 crisis had caused global trade disruptions creating specific implications for the livelihood conditions of migrant workers. Besides, the socio-economic impact on migrant workers has a gendered dimension to it. Women migrant workers face multiple deprivations due to pre-existing gender barriers which underscore constant relegation of women’s rights and needs, as secondary. For example, in India mobility constraints and gap of access to information have become the main factors underlying the exclusion of women migrant workers from the government’s social protection schemes (Guha-Khasnobis and Chadna, 2021). In Malaysia, undocumented women migrant workers face potentially life-threatening situations of delivering a baby on their own and may not have access to appropriate sanitation facilities for their reproductive health needs due to lack of documentation (Phromkade, 2020).

The second economic sector is healthcare, which can be a dangerous environment with constant exposure to harmful diseases and chemical hazards, as well as challenges like long working hours, stress, and irregular shift work. Employees in this industry are persons who deliver clinical and social care services, either directly as doctors and nurses or indirectly as aides, helpers, laboratory technicians, or medical waste handlers (Joseph and Joseph, 2016). The healthcare industry includes state-funded to private organisations, which provide services such as nursing homes, hospitals, mental health institutions, general practitioners, dental, pharmacies, physiotherapy clinics, home care, paramedics (Health Protection Surveillance Centre, 2021). Although it is possible to prevent or reduce healthcare worker exposure to harmful hazards, occupational injuries and illnesses with healthcare workers are among the highest of any industry sector (Center for Disease Control and Prevention, 2021).

Occupational segregation by gender in the health sector is universal, with women making up the majority of workers around the world. Yet, women health workers are concentrated in lower status, lower paid and often unpaid roles, facing harsh realities of gender bias and harassment (Gebreyesus, 2019). According to World Health Organisation (2019a), 24 million out of the 28.5 million nurses and midwives globally are women, while men are more likely to be physicians and specialists or occupy leadership and managerial positions. In addition, a persistent gender pay gap of 10 per cent continues to keep women healthcare workers across all levels in poorer economic conditions over their lifetime (ibid). Outside the formal labour market, the invisibilisation of women and girls working in health and social care persist. Women in health contribute 5 per cent to global gross domestic product (GDP) (around US$3 trillion) annually, out of which almost 50 per cent is unrecognised and unpaid. This includes women and girls delivering care to family and others in their communities (Baniol and others, 2019). Without a gender equality frame, the healthcare industry misses out female talents, voices, and leadership which could strengthen the foundation of the global health system.
The third sector is **entrepreneurship** which implies the organisation and management of resources to run a business enterprise (Eisenmann, 2013). Women are only about half as likely as men to be involved in starting a business. **Female entrepreneurs are more likely to work in feminised sectors like personal services, tourism, retail, arts, and entertainment.** These sectors are characterised with low-paying economic activities, and thus on average, **women entrepreneurs’ saving capacity is limited** (OECD, 2021). Evidence suggests that societal attributions relative to the sexes and their intersecting identities with class and race, create invisible barriers to women due to uneven distribution of assets, educational foci, and daily life care responsibilities (Sullivan and Meek, 2012). For example, female entrepreneurs bear a disproportionate share of care responsibilities at home which restrict the time available to run their business. Furthermore, patrilineality has excluded female heads of household from productive land ownership and/or control over livestock assets. These factors, in effect, create a glass ceiling and glass wall for women entrepreneurs (Sullivan and Meek, 2012).

The COVID-19 crisis has created enormous setbacks for women entrepreneurs as they often lead enterprises in consumer-facing sectors, which were hardest hit by the pandemic shock. They were also more likely than men to shoulder the responsibility for unpaid childcare, unpaid adult care, and unpaid domestic work which affect their ability to focus on work. Moreover, women-led businesses were also less likely to gain access to public support than men-led businesses (De Paz and others, 2021).

Customary law and legal restriction also continue to hamper women to own and manage property and other means of economic productivity (World Bank, 2021). The pandemic has reinforced uneven impacts on entrepreneurship and various other sectors. **Efforts to improve women’s economic resilience across sectors need to highlight traditional norms, structural barriers, and legal obstacles which get in the way of women to survive and thrive in the context of crisis.**

Focusing on women labour migrants, healthcare professionals and women entrepreneurs will help shed light on structural features and intersections of inequalities in the lives of women working in feminised professions, and feminist rebuilding. Women labour migrants and small-scale informal women entrepreneurs have been largely ignored in policy decisions, media reports and at least partly in research. Despite the fact that they are often working in low pay yet high demand and high-risk jobs during the pandemic. Therefore, there is a risk of missing out on their needs and interests in discourses of justice and rehabilitation. **Women in health, however, have been able to assert their expertise due to attention on women’s leadership during the pandemic in politics and public health.** Focusing on these groups of women as anchors, we **aim to highlight how grassroots feminist organisations have attempted to respond to the crisis and what we can learn from their approaches.** In doing so, we highlight, both women’s rights groups and feminist grassroots organisations.
Responses of feminist organisations

The initial responses to the pandemic have been ‘masculine’ in terms of war rhetoric applied in formulations like ‘waging a war on the virus’. Control mechanisms largely ignored the needs of the most vulnerable. As the masculine ways of containing the virus and its spread took precedence (Rajgopalan, 2020), there was a response rooted in feminist principles of collective care, resisting injustices, and looking after the most vulnerable. In this section, we look at such responses initiated by feminist grassroots organisations. Throughout, these responses have seven main interrelated but not interchangeable approaches: acting with a sense of urgency, knowledge generation and creation, providing invisible infrastructure, collectivisation, acting as intermediaries, following a praxis of care and being practical.

The initiatives and organisations discussed here do not necessarily have an explicit feminist standpoint in their agenda or perspective. However since feminism as a philosophy, movement, and methodology is dynamically shaped from women’s experience on the ground, we consider their responses nevertheless feminist. What we have tried to do is to bring forward the realities of women coming together and identify approaches that enable them to assert, retain, and reclaim their agency, especially in the Global South. One example, among others in this report, that is explicitly feminist, is the Women for Human Rights (WHR)-Single Women’s Group in Nepal. They are part of the Feminist Humanitarian Network (FHN) which is a member-based network of grassroots and national women’s right organisation, regional networks, international non-government organisations (INGOs) and individuals. The network aims to strengthen the agency of women in emergency situations and transform the humanitarian system guided by feminist values (The Feminist Humanitarian Network, 2020). Others, like the Aajeevika Bureau, and Community of Practitioners on Accountability and Social Action in Health (COPASAH) for example, do not express themselves as feminist. We consider these organisations as feminist nonetheless based on the work and the nature of work they do.

Acting with urgency

The SARS-CoV-2 virus was first detected in China in December 2019. In several Asian countries like India, Pakistan, Bangladesh, the Philippines, and Myanmar, the first cases of infection began to appear between late January and late March (World Health Organization, 2020). For some countries it was several months before they realised the seriousness of the situation. When they did, lockdowns were announced swiftly and with little prior notice. In India, for example, the nationwide lockdown was announced on 24th March 2020, almost two months after the first infection was detected in late January. The lockdowns announced were total, often lasted three weeks or longer and were strictly enforced, which severely curtailed the daily movement of people. Lockdowns not only caused immense confusion and frenzy but also triggered hardships especially for the most vulnerable groups in society at an unprecedented scale. The results ranged from uncertainty to loss of livelihood, especially for migrant labourers, and those employed in the informal economy.

Scores of migrant labourers and those employed in informal jobs were seen undertaking long journeys to their home on foot, on account of the closure of public transport. Indian historian Ramachandra Guha compared the lockdown in India with the exodus that resulted from the partition of India and Pakistan (The Hindu, 2020). The migrant labourer crisis was not the only crisis that unfolded due to the lockdowns. Even those who stayed back in the cities faced enormous uncertainties with respect to how they would make ends meet. Impoverished residents were further pushed back as the lockdowns severely restricted the supply of essential services and products and starvation became a real threat (Kapoor, 2020). It seemed like, the state, in its need to act swiftly, adopted a myopic view of how to contain the virus and inadvertently attacked its own people.

However, in resistance to this urgency, there was another urgency that was observed – that of feminist grassroot organisations. Feminist activists and organisations swiftly foresaw the inevitable plight of stranded labourers and demanded governments to announce
relief and other welfare measures. Others, simultaneously worked on gathering information on those who were most likely to fall through the cracks of policy decisions. While serving as a bridge between the labourers and the government, feminist organisations with their ear to the ground, were once again able to demand the relaxation of bureaucratic requirements that impeded migrant labourers and women from accessing rightful relief. Feminist organisations sensed the urgency in mobilising to provide different kinds of services, pivoting in a very short term and adapting to the emergency at hand.

One such organisation is Nirantar, a not-for-profit, working in various parts of India on the issue of gender and education. As the lockdown was announced, Nirantar joined hands with their on the ground partners in the states of Bihar, Delhi and Uttar Pradesh. They pivoted from their goal of developing gender transformative education to helping the vulnerable in rural and peri-urban areas by distributing dry ration and basic sanitation kits, sharing knowledge regarding the spread of the virus, basic sanitation kits, and helped women and others filling up the forms to access government aid. Nirantar’s team was on the ground the day following announcement of the lockdown in India was announced. In just a matter of three weeks, they raised awareness for problem of increased domestic violence in homes, drop-out of girls from schools, and the plight of women migrant labourers who were back in their native places, facing discrimination and hardships not just from others in their villages but also from government officers. They also recorded podcast episodes for greater dissemination and advocacy. In the first three weeks, they were able to cook meals for 2000 individuals, fill up 500 forms to access dry kits distributed by the government, distribute dry essential food items to 700 families, provide financial aid to 200 families, among others. The promptness with which Nirantar has been able to act (and continued to act until July 2021) indicates the agility of the organisation in adapting to new objectives, the freedom and trust of funders and other decision-makers to divert funds during emergencies, and to put the vulnerable people first (Nirantar, 2021).

**Acting as intermediaries**

As intermediaries, women’s organisations act as a bridge between communities and government through their localised action. They are usually the first actors to identify women’s needs and problems and bring their rights to public attention. Women’s movements and organisations have driven global and national action on gender equality because they often have shared experiences and understanding on the nature of discrimination women and girls face (UN Women, 2021). Beckwith (2000) highlighted that women’s movements are a subset of socio-political movements focusing on women’s gendered experiences as a distinctive and a collective problem. Women-focused organisations often engage in a wide range of developmental issues, partly because their concerns have not been adequately addressed by existing parties and systems (Holm, 1992). They, therefore, have long engaged with multiple parties in various efforts to speak for their communities’ needs and bring about broader social change to their lives.

Women leading intermediary action is evident during the COVID-19 pandemic, particularly in the context of extending local government’s support to marginalised community of migrant workers, especially women and undocumented labourers. Their vulnerability has been heightened during the pandemic since some countries imposed mobility restrictions to contain the spread of the virus. The restrictions left businesses shuttered, causing many labourers to lose their livelihoods, or stranded without employment and social protection due to border closure, sometimes forcing them to stay with their abusive partners or employers. At the same time, public services in many countries were strained to their maximum capacity, leaving the government scrambling to respond to the crisis, often deprioritising specific needs of groups that were critically affected. Women led civil society organisations (CSO) have shifted their focus of activities to meet the emergent needs of those whose access to essential basic service was already limited. Feminist organisations succeeded in gaining trust, acting in an empathetic manner, and building solidarity with undocumented migrant workers, sex workers, victims of sexual harassment, and impoverished single mother groups to develop a sense of belonging and mutual respect within these communities. Persatuan Sahabat Wanita Selangor (PSWS) (see box 1) in Malaysia and Young Feminist Collective (YFC) (see box 2) in the Philippines are examples of organisations being intermediaries to bridge action with other institutions and mutual-aid groups as the crisis struck. They showed their capacity to organise and coordinate to generate solutions for problems, which often are overlooked by the existing formal, often bureaucratic, structures.
Box 1: PSWS’s migrant worker resource centre

Persatuan Sahabat Wanita Selangor (PSWS)’s programmes and activities focus on fostering interest in the struggles of women workers to improve livelihoods through various campaigns, labour organising, capacity building and leadership training for women workers. During the pandemic, PSWS has worked with the EU-UN Spotlight Initiative’s Safe and Fair Programme in Malaysia to establish Migrant Worker Resource Centre. PSWS conducted site visits to Semenyih in south-eastern Selangor where workers and children lived side by side in the mills surrounded by saws, stacks of logs, sawdust, and mud. The organisation arranged site visit to the community of undocumented migrant workers and paid attention particularly, to women’s needs and those heavily impacted by the lockdown. They offered a safe space for women migrants to find refuge and seek help when their rights are violated. They provide information on safe migration and COVID-19 prevention and also supported in the distribution of essentials which included providing food and personal protective equipment (PPE), organising a doctor’s visit to the community, assistance in free medical check-ups, as well as pregnancy tests to women (Phromkade, 2020). Apart from providing shelter and basic needs, they have been working towards bringing migrant protection issues under the spotlight through advocacy in gender-sensitive labour migration governance framework, in response to reported violence and trafficking cases.

Box 2: Catering emergency needs

During the lockdowns, there have been reports on the irregularities of emergency crisis response to support individuals facing economic hardship and displaced workers (UN Women, 2021). Quarantine passes which permit an individual member of household to buy goods and to pay utilities are extended to heads of households, who are usually men. Checkpoints are not designed to be a safe passage as women officers are not commonly present to conduct pass and temperature checks. Women, particularly those working as sex workers, have reported sexual harassment and abuse by officials at checkpoints. After the introduction of mobility restrictions on national level, YFC raised funds to provide hygiene kits to 250 mothers and food packs to mothers in Jose Fabella Hospital, which catered to impoverished communities of mothers and children in Metro Manila, providing safe passage for emergency assistance to those who had no access to mainstream relief as a result of gender-blind recovery efforts. YFC used its capital and influence to shield migrant women, sex workers and others by negotiating with institutions and enabled assistance of various kinds to them. YFC which engaged in advocacy and collaborative work to address a wide range of women’s issues, during the pandemic, extended its focus to support women and mothers from marginalised backgrounds.

As such, feminist organisations – including those under this study – fill cracks in the state’s support, by providing alternative informal safety nets against the hardship and adversity of the crisis to the community on the ground. Intermediaries may share some commonalities with collectivisation and invisible infrastructure in the way it builds alliances to work towards the same goal. Yet, it has its own distinct characteristic. While in collectivisation, feminist practices are centred on an explicit goal to challenge the status quo of power, and invisible infrastructure is stemmed from collective organising, intermediaries focus on enabling a reciprocal channel between the often ‘powerless’ communities and institutions. Being “an ally” for both constituencies embody a subtle force which pushes authorities to recognise and address the issues of marginalised groups in a more humanised way.

Collectivising

The relationship between feminism and collectivisation is strong. Feminist movements, since the beginning has involved in forming solidarities among women within
Collectivisation has meant that COPASAH has been to a community-centred model of health and care for a few. They have also been able to move away from a doctor-centric model of health and care to a community-centred model of health, where everyone contributes to the health of individuals. Collectivisation has meant that COPASAH has been able to build solidarity not only among themselves as professionals, but also with their audience, the public.

Similarly, WGH, a collective of women health leaders from around the world, wrote an open letter addressing global leaders, advising them to pay more attention to gender equality during the pandemic. It also demanded for PPE’s that fit women health workers better and called for inclusion of more women voices in expert analyses (Women in Global Health, 2020). Through global collaboration, WGH has been able to demand more attention to the contribution of women in medical fields. Like other organisations, it was able to get some of their demands met because they recognised the collective power as one of the most powerful tools in countering the power of decision-makers. They were also able to make use of the attention that feminist leadership was garnering all over the world in handling the COVID-19 pandemic better than their male counterparts. They were also able to build solidarity across the healthcare workforce beyond doctors or senior researchers building on the common objective that bound them all – respect and recognition of their rights and expertise as healthcare providers.

Besides the civil society organisations, women trade unionists also used collectivising as a tool to make their voices heard. The Maharashtra Rajya Gatapravartak Ani Ashaswayamsevika Sangha, a state-wide union of social health workers, mobilised 70,000 members and called an indefinite strike from 15th June 2021 demanding increased pay and a monthly COVID-19 allowance. Despite the gender stereotype that women are altruistic and will prioritise their caring roles even while being harmed themselves, the ASHA workers went on strike during a health emergency. Prior to this, they had already organised strike in May 2021 and August 2020. Through their strike they were able to put a spotlight on the feminization of care work and highlight the intersectional problems women workers face – especially workers who are single mothers belonging to marginalised communities. The ASHA workers used the right time to demand changes as all public attention was on the health sector aided by the media and research community. There was considerable outpouring of public support for the cause of the ASHA workers all over the country. The ASHA workers in Maharashtra during the pandemic joined hands with other worker unions until they realised that they needed a voice and identity of their own and started unionising. Finally, the strength in numbers combined with the timing of many
essential workers going on strike at the height of the pandemic forced decision-makers to take notice and act on their demands.

In Vietnam, the Vietnam Women’s Union (VWU) has wide public support though membership (Waibel and Gluck, 2013), giving it legitimacy in terms of its numerical strength. They made use of their collective strength to reach out to Vietnamese young women migrant workers in Malaysia, South Korea and across the world (Bui and others, 2021). They collaborated with the Vietnamese community in South Korea to launch a program ‘Giving Love’ where they gave away gifts such as food, hygiene kits, and face masks. In Malaysia, they collected and donated money for the COVID-19 vaccine fund to Vietnamese ambassadors. With their membership network, the VWU also able to offer services in social integration, administering vaccine shots and collecting donations.

Providing invisible infrastructure

There are several aspects of our lives that are supported by visible physical infrastructure, such as transport facilities, housing, entertainment and recreation. There are other social infrastructures that enable the smooth functioning of our lives, like health care, education, art and culture. Amongst the various systems that keep our lives functioning, is an invisible infrastructure that is seldom visible but is of immense value. This invisible infrastructure is the unpaid labour often performed by women or those in feminised professions.1 The closure of schools, workplaces, recreational and open spaces, as well as confined movements meant that this invisible infrastructure has been severely restricted. Invisible infrastructure is a network of support established often by women to provide mutual aid in social, cultural and economic areas. As a feminist practice, this can be a school in the community undertaking dual role as a childcare facility as the mother might need to work. This invisible infrastructure keeps societies going and in times of crisis, such as the COVID-19 pandemic, it enables society to have immediate coping strategies in the absence or slow response by the local government.

This form of infrastructure exists because of women’s essential position in social reproduction. Social reproduction can be understood as any activity regarding social, cultural and biological reproduction that enables people to survive and function properly (Bhattacharya, 2017). Thus, women’s roles are embedded in the well-being of the community itself and capitalism hinges upon women’s social reproduction in order to maintain the economy. However, their unpaid activities and invisible infrastructure is structurally undervalued, and their contributions tend to be seen as disposable, being deemed unproductive, and overlooked in policy making. Due to their central role in social reproduction of unpaid labour in households and communities, women’s invisible infrastructure is a strategic way to maintain a web of support in response to challenging circumstances (Vaz and others, 2021).

The experience of Perempuan AMAN (see box 3) and Women for Human Rights (WHR)-Single Women’s Groups (see box 4), has shown that invisible infrastructures support community resilience. Feminist campaigns and advocacy often start at margins of development and policymaking and is used in the invisible infrastructure of the grassroots.

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1 Based on conversation of the authors with Dr Aditi Arur in October 2021.
Box 3: The indigenous invisible infrastructure

Association of Indigenous Women of The Archipelago (Perempuan AMAN) is a wing of Indigenous Peoples Alliance of the Archipelago (AMAN) in Indonesia. They took action immediately after the outbreak through managing local food sources. They urgently reached marginalised communities in remote areas while simultaneously exercising their indigenous knowledge of traditional farming practices. They coordinated, informed, and documented various lessons learned from their own indigenous communities. They observed local mini lockdown, harvested their fields for food sources and provided mutual support through local knowledge of nature-based solutions.

Permpuan AMAN was able to provide this invisible infrastructure to their own community as they had to look after themselves due to limited concern for indigenous people from mainstream government and development agencies responses. This self-reliance was crucial, when other formal support structures fell apart. While life revolving around market mechanisms came to a halt, sustainable lifestyles – living closely with nature and nurturing it – provided protection. The existing invisible infrastructures of local knowledge and communal networks among Parampuan AMAN proved to be invaluable (Muntaza and Affiat, 2021).

Box 4: The care for the caregivers

Women for Human Rights (WHR)-Single Women’s Groups was able to support women in Nepal in various ways – single women and widows, migrant women labourers working abroad, as well as families and infants. WHR was able to work with the Nepalese Government and set up women-only quarantine centers in 21 districts for women migrant workers. These centers were handled by a female security team. WHR also provided cooked meals to poor families, sensing that raw food materials might not be of any help to displaced migrant workers (The Kathmandu Post, 2020). They also set up a community kitchen to provide daily meals for frontline workers during lockdown and mobilised their staff at central and provincial levels to set up and cluster groups to reach out to vulnerable minority groups. Through the utilisation of feminist knowledge-based invisible infrastructure, WHR was successful in supporting the state to set up an Emergency Trust Fund solely for single women or widows. This led to government developing a National Action Plan for Widows under The Ministry of Women, Children and Social Welfare (MoWCSW).

A close reading of the work undertaken by WHR shows it taking on the role of protective families, a crucial infrastructure that was taken away from people at an extremely challenging time. Losing jobs, not having supplies or food, and facing complete uncertainty coupled with the isolation of quarantine facilities can leave families feeling unnerved. At the same time, quarantine facilities can not only be isolating but can also leave women vulnerable to various types of threats. WHR assumed the role of a caregiver not only to migrant women labourers by helping arrange safe and secluded spaces, but also to single mothers and infants through supply of nutritious ready meals. These roles exemplify the unpaid care work often taken up by maternal figures within families in capitalistic societies.
Following a praxis of care

Feminist practices have increasingly identified their action on the principle of caring as also referenced in the previous section. In order to better see the significance of this, we look at the way women’s organisations have been exhibiting praxis of care as the moral imperatives of their action, while focusing on providing crisis support. This model of care emphasises the importance being connected with others and nurturing relationships, as opposed to male-centric moral paradigms, usually and culturally associated with rationality, logic, universality, and objective rules. The practice of care has been influential in a wide range of female-dominated professions such as nursing, teaching, counselling, and childcare.

In the context of the COVID-19 pandemic, the crisis has posed an enormous challenge to political systems’ ability to cope with health and economic disruption. This results in the abuse of power as countries’ reactions to the pandemic often prioritise compliance and coercion as priority of crisis management. For example, in the study of crisis communication in some Asian countries, the use of war rhetoric to communicate the severity of the crisis to the public has had strong connotations with the use of abusive methods on behalf of national concerns (Rahmadhani and others, 2021). The war-like responses that were widely evident are culturally and historically aligned with the patriarchal ideology. The normalisation of masculinised responses is destructive in the long run as it could prevent better understanding of the crisis as a humanitarian issue, and needs more responses accordingly.

Women organisations like Tanoker Community in Indonesia have used a praxis of care to help others to meet their basic needs, sustain capabilities, and alleviate pain or suffering in the context of a pandemic. Practices of care during crisis include community building, discussion-based learning, collective reflection, consciousness-raising exercises, and activities and resources that tie to activism within and the outside community (Tanoker, 2021). The model of interactions exhibited in Tanoker’s activities embodies the values of solidarity and facilitates the goals of organising for action. Many of them come together in the spirit of solidarity and create a shared space of burden and collective responsibility.

A praxis of care is widely embedded in many feminist practices, which enable them to intimately connect with the community members and understand how they relate to each other. Community is the centre of feminist value systems, which highlights collective capacity over individualistic, patriarchal, and consumerist culture mainstreamed in the neoliberal model of social service provision (Hoover, 2019). In doing so, women’s organisations have focused on the language of compassion and interconnectedness to overcome the crisis as opposed to authoritarian cooperation embedded in many emergency responses all over. These caring practices allow people to recognise inequality in an empathetic way, and therefore prompt them to help women and other marginalised groups in physical, cognitive, and emotional ways.

Being practical

In the time of the pandemic, organising an immediate response is essential to survival and maintaining livelihood. Women in communities play a central role in this, using their invisible infrastructure and praxis of care through hands-on and practical work. Practicality during the COVID-19 pandemic meant collecting and providing essential material needs such as food, face masks, hand sanitisers, quarantine space, or cash to help each other and responding to different needs of women that are often overlooked. Planning, decision-making and programmatic agendas are often done through the formation of formal national and local government structure. Yet, the sense of urgency and the impact of crisis have permeated into people’s households in the form of fear of disease spreading, loss of income and disruption in the supply and demand of goods and services. Women have taken immediate measures to address real life consequences that are close to them.

The Vietnamese Women’s Union (VWU) utilised its international network to provide hands-on, practical aid for Vietnamese communities abroad. In Malaysia, they collected funds to donate for COVID-19 vaccination as well as to assist Vietnamese migrant workers. In Australia, VWU supported Vietnamese communities, particularly single mothers and mothers who had lost their jobs, by creating a space for women to meet, exchange and support each other in all fields, especially in caring for children. In Vietnam, VWU with the state’s support, provided essential services in delivering basic foods and hygiene kits to nearly 1,000 poor households and more than 170 communal health stations and kindergartens, along with efforts to
supply clean water to more than 3,600 households in five Vietnamese provinces.

Similarly, Solidaritas Pangan Yogya (SPY) started as a movement initiated by a group of women social activists in Yogyakarta, Indonesia, to help the informal workers who faced the double threat of virus transmission and the loss of income. When the pandemic started, these women activists conducted field visits to places where low-income informal workers make up the majority of the workforce, such as local markets, city parks, street sides, etc. They talked to pedicab drivers, porters, small street vendors and scavengers among many others, to gather information and identify their urgent needs. SPY developed the idea of setting up public kitchens in several central locations where informal workers small businesses are located or where they offer their services. This movement has successfully engaged with volunteering communities to collect public funds of up to around 50 million IDR (approx. 3270 USD). These donations were used to cook 100 packs of food every day. Now, SPY has established at least six kitchens around Yogyakarta and has continued to distribute food packages not only to informal workers, but also to the senior citizens (Portal Informasi Indonesia, 2020).

Knowledge generation and creation

A significant feminist struggle has been the fight for knowledge. The feminist philosopher Sandra Harding (1991) asked: “how do we know what we know?”, pointing to the need of creation of spaces for feminist knowledge. In 2020, during the start of the COVID-19 pandemic, we once again did not know who would fall through the cracks of welfare systems and who would be completely ignored. As described earlier, the urgency of the situation demanded action even before knowledge could be gathered or created. Different groups of people, about whom data was missing, were at the risk of slipping under the radar once again. Key gaps in knowledge that existed at the time of the pandemic included several marginalised groups, such as women headed households, single mothers, informal workers, sex workers and so forth. Two groups that was especially scarce about were migrant women labourers and women entrepreneurs.

As the exodus of migrant labourers started from urban areas to rural areas in different countries of Asia, considerable attention was paid to male labourers. While it is true that most of the people who leave their homes and have countries search of jobs are male with the women joining them often mainly for caring of families, women also take up jobs that add to the income. In some cases, especially where the women are single or head the household, it is the salary of the migrant women labourer that serves as the sole source of income. Most countries lack a credible and comprehensive database on migrant labourers. This lack of data not only makes these people invisible in the places they work, but at times, also at their place of origin. It also complicates any action to meet their needs. In rural areas, women labourers who were employed abroad returned to their homes, only to find no way to access welfare and support during the pandemic here as well. According to the ILO (2021), about 50 per cent of women migrant labourers will not return to work due to the harrowing experience of being stranded abroad. In India, for example, although the Vande Bharat Mission of the government organised chartered flights to bring back workers stranded abroad, the absence of support and preparedness for internally displaced migrants was glaring (Patel, 2020). In all, the coverage on women workers is conspicuous in their absence.

Aajeevika Bureau and Solutions for Transformative Rural Enterprises and Empowerment (STREE) are two initiatives in India that highlighted the importance of knowledge creation. Aajeevika Bureau (see box 5) building on decades of knowledge creation on issues of migrant workers was able to foresee inevitable challenges that these workers would face in the times of mobility restrictions. Moreover, with their existing work lines, they were able to keep and track records of stranded workers and cater to their needs. On the other hand, STREE, a research unit setup in Krea University in India, was able to conduct a rapid assessment of the situation of women entrepreneurs in Bihar, Chhatisgarh, Madhya Pradesh and Odisha in India. Their assessment concluded that almost half of the women received no assistance from governments, CSOs or NGOs and were more unlikely to return to their businesses (Narsimha and others, 2020). Moreover, it showed how women are often overlooked in welfare measures and shed light on the paternalistic attitude of the government.
Box 5: Decades of knowledge creation for an effective response

Aajeevika Bureau has been working for decades on empowering migrant labourers in India. As the lockdowns were announced, there was an immediate need to document the hardships faced by stranded labourers, to create real time reports to inform the public discourse, and thus put pressure on governments to catalyse equitable change. The Government of India appeared as if it was unaware of the catastrophe that would unfold, especially in the case of migrant and daily wage labourers. Aajeevika Bureau, along with their partners, took the initiative to create knowledge and use it to influence policies and initiate programmes for migrant returnees.

Two reports from the Bureau had put spotlight on women and their livelihood. One, on the effect of the pandemic on women in rural India and the other on the loss of livelihood of tribal women. The in-depth reportage on the impact of the lockdown on women in rural areas suggested that the return of men migrant workers during non-agriculture season meant that men spent enormous amount of time at home without lending any support for domestic and care work (Agarwal and Rajput, 2020). Another eye-opening finding of the report was that women required additional paperwork to access welfare schemes. Another report on tribal women’s plight during the pandemic showed that because of the strict movement restrictions in rural and tribal areas, women had to cut grass to feed their animals instead of taking their animals out for grazing which added to the workload of women (Dhurve and Rajput, 2020). Closures have meant that tribal women had no place to find work and face the threat of starvation.

The creation of the aforementioned reports was only possible due to the extant knowledge available to Aajeevika Bureau through their advocacy and outreach over the years. The Bureau had data and knowledge on critical points like monthly living costs that migrant labourers incur, the rent cycles in poor or informal housing, and cycles and seasons of migration which are key parameters that helped them foresee inevitable challenges. The existing data also allowed them to build on and create new knowledge when the media spotlight was on the issue. The reports, in turn, enabled initiatives like unconditional cash transfers, on the job trainings for migrant returnees, medical help in villages, providing meals for children and ration for adults and support to entrepreneurs (majority women) to restart their businesses in services of their communities (Aajeevika Bureau, 2020).

Apart from these reports, the labour line has been a source of great solace for labourers during the early phase of the lockdown. In 2014 Aajeevika Bureau started the labour line, which is a toll-free phone line that provides counselling services to labourers. They provided information on how to navigate any distress they face with respect to wage exploitation, ill-treatment by employers and other problems, along with the backing of laws that might safeguard them. The labour line continued to provide legal and psychosocial support to stranded labourers during the pandemic. Since the start of the lockdown, they received almost 30,000 calls from migrant labourers. Most of the calls that they received were related to questions about the termination of their employment and wage cuts during the lockdown, which the government had outlawed. In order to manage the upsurge of calls during the lockdown, the existing five-member team was expanded to a 15 team members. Simultaneously, close relationships with the government’s labour department ensured that Aajeevika Bureau team had timely access to correct information which was shared with the callers. The Bureau also observed that the number of women labourers calling in were few, but they were still part of group cases, where labourers form certain clusters. Continuously being in touch with large numbers of migrant labourers provided Aajeevika Bureau real time insights that were used to bring about immediate relief through policy or civil-society support.

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2 Based on conversation of the authors with Dimpal Sharma from Aajeevika Bureau in October 2021.
Feminist groups and organisations, like Aajeevika Bureau, STREE and many others were able to bring the plight of marginalised groups in society into limelight. They succeeded in this due to various reasons. Firstly, due to their objective of working with a group that requires additional support, gathering knowledge about them and finding ways of empowering them kept the organisation connected to their life reality. Secondly, this contribute to foresight and knowledge of what are some likely challenges that particular group might face. Thirdly, crises only exacerbate existing inequalities, and researchers are able to use their prior knowledge to differentiate exactly how these inequities have multiplied or have persisted.

To sum up, with hands-on practicality, solidarity and sense of urgency, women’s movements and initiatives often play the role of intermediaries between people on the ground and the government. By utilising the invisible infrastructure mostly unacknowledged by state intervention or development planning, their role serves not only as a bridge, but also a mediator between the state and the people. In some cases, following the praxis of care and stepping on the knowledge that they have generated over the years, feminist organisations have been active advocates whose activities contributed to make policies more inclusive and people-based.
Variations on the feminist approaches outlined in the prior sections of this report have repeated themselves across the organisations under study. The COVID-19 pandemic has ultimately marked a critical point of time when women’s organisations, due to heightened attention of the public, are able to show their capability in providing means of dealing with the crisis. With the onset and deepening of the COVID-19 pandemic, they have acted as the backbone of the emergency relief provided and contributed to addressing the immediate needs of the situation. It has also been evident that they can contribute to long-term recovery and resilience efforts in the post-pandemic era. In this section, we draw out some learnings and insights from their practices and approaches, to better understand the critical role of women’s organisations in the context of future policy response.

The backbone of inclusive emergency relief system

Crisis events such as war, natural disaster or disease outbreak are often documented as increasing women’s vulnerability and to heightening gendered burdens. This situation become even more visible among the most marginalised as highlighted in this study – women migrant labourers, healthcare workers and women entrepreneurs. Their immediate vulnerabilities reflect worsening symptoms of inequalities, which in turn can shape the severity of the pandemic’s impact in the long run. The suddenness of the crises can result in the feeling that unprecedented times need a special response. The efforts at recovery, however, will be significantly weakened if they do not factor in how the response has disproportionately affected women and shaped distinct issues and unique needs of marginalised groups. Although men were affected as well, many women among the group studied found it difficult to access formal services and continue to receive ineffective services due to gender discriminatory relief systems. The frenzy of these situations can lead to reversal of any hard-earned progress made in the area of women’s empowerment, with gender parity appearing to be moving further away.

Women’s organisations understand that those are the immediate and direct gendered realities that need to be taken into account if existing inequalities are not to be perpetuated or amplified in the future. Therefore, they foreground their action on the feminist approaches of sense of urgency, practicality, and intermediaries to address urgent needs and to maintain alternative support to those who most need it and lack access. In doing so, some initially focused on providing essential services – particularly related to healthcare and welfare – to women and others who are falling through the cracks of government safety nets. In other contexts, they act as the social conduit that assists the authorities to reach out to the communities on the ground in the context of service delivery.

Women and the marginalised groups, particularly those facing multiple intersecting oppression, often live in a complex system and structure of exclusion and discrimination, which can result in community-wide distrust and trauma. Women’s organisations focus on caring practices woven into ways of working with these groups to build trust, connection, and solidarity as opposed to prioritising power. Praxis of care is central to creating and sustaining alliances as it is centred on empathetic practices to act on behalf of others.

Driving force of the long-term recovery and resilience

Feminist approaches have the potential to be transformative if they are grounded in deep commitment to engage with power redistribution, as a way to address the root causes of inequality. Some laws and regulations aimed at containing the spread of the virus have constrained the democratic space and restricted freedom of speech and action, leading to potential abuse of power bestowed on the government. Women’s organisations outlined in this report undertake a combination of collectivisation and knowledge creation, to build social capital and strengthen their capacity to advocate for greater transparency, accountability, and inclusivity. They do so through a wide network of partnerships with like-minded organisations which allows for the visibilisation of different groups of people and their challenges, while also supporting better governance and decision-making.
These networks embody a strategic space where women can narrate their stories and present their perspectives to find alternatives, negotiate and ensure that these alternatives translate into policies leading up to transformative change.

Looking back at the work of feminist organisations in the Global South, and the advocacy of the Global North for women and others, we need to appreciate the solidarity, yet be aware that the Global South is not homogenous. The pandemic marked a momentum for women’s organisations in the Global South to highlight, the realities women faced on the ground and their survival strategies and bring them to policy discussions. Their responses have been complex, marked by wins and losses, just like the responses of those all over the world. Feminists grassroots organisations have been able to balance the power in their local context, just as this report tries to balance the power of narratives through examples of resistant responses. From the learning and outcomes women’s organisations have contributed to some critical points of policy recommendations as indicated in the following section.
Recommendations

These approaches are a web of multi-scalar and diverse forms of women’s agency that have demonstrated a great capacity of resilience. Any policy measures for crisis-response should identify, acknowledge and integrate strategies that emerged from these approaches, in order to enable improved crisis responses as well as more effective and transformative policymaking in the future. This report proposes a set of recommendations aimed to ensure long-term sustainability of direct and meaningful participation of women’s organisations at all levels.

Recognising the critical role of women’s organisations in providing informal safety nets

The COVID-19 crisis highlights the crucial role women’s organisations play in providing basic supplies, essential services, and vital information to communities. Their unwavering responses often substituted, rather than complemented the formal support mechanisms provided by the state institution. Their capabilities to overcome hurdles to meet the immediate needs of communities need widespread public recognition and should also draw support from authorities. This could include formulations of clear regulations to cut down bureaucratic hindrances which enable women’s organisations to provide better access for communities and beneficiaries to the services. Future regulatory measures like lockdowns and movement restriction needs to consider the impacts on women CSO’s ability to function, particularly when direct engagement with vulnerable groups is a crucial aspect to maintain and establish trust and communication. Formal recognition should also acknowledge the contribution of women’s organisations, for example by making use of their knowledge and work as evidence base. Making the role and contribution of women’s organisations visible drives a momentum for more inclusive future crisis responses by drawing on the impacts these organisations had on communities.

Improving working condition of not-for-profit workers

While women’s rights organisations swiftly mobilised themselves, many among them have also been struggling to face the increasing hardships caused by the crisis. Available data suggests that not-for-profit organisations typically employ a largely feminized labour force that often works under precarious arrangements, including low wages, overtime working hours, and temporary or part-time contracts with minimum social benefits (UN Women, 2021). During the pandemic women workers are exposed to increased risk of contracting the virus when they go to communities to deliver services. Local women-led and women’s rights organisations across a range of countries in the Global South were experiencing months of delay in access to PPE, which should have been supplied by international agencies (ibid). Therefore, if their role as essential workers is recognised, their safety and well-being should also be mutually guaranteed. This could include the provision of PPE, psycho-social support ensuring sufficient income to meet their basic needs, safeguarding, and training on their health and safety. If we fail to address these needs, the pandemic which has compounded their poor working condition, may in turn create negative ripple effects on the communities of beneficiaries, who are in direct contact with them. The improvement of working conditions among women workers should also be coupled with investments in public services in the communities they serve, to minimise exposure. Furthermore, as women’s organisations fill the gaps in the state’s provision of public services to the community could also ease the demand on services these women’s organisations provide.

Resource distribution to sustain the survival and capabilities of women’s organisations

Member contributions and donors play a big role to fund the operational activities of CSOs. Yet, the economic downturn caused by COVID-19 has diverted national and international attention away from emergency pandemic responses and state capacity building, which in turn could deepen the financial difficulties posed by the CSOs. The funding cutbacks pose a threat to the ability of women’s organisations to function. To mitigate this all stakeholders including government and international actors could increase their commitment to amplify women’s organisation efforts during the pandemic response and recovery. This should include providing collective spaces, where different stakeholders in international, national, and local level can optimise their resources as well as create a mutual support system among communities. Governments and donors could adapt
their administrative requirements and exercise flexible procedures to enable direct funding to smaller and medium-sized women-led CSOs, which significantly contribute at the grassroots level but are frequently excluded from donor funding. Not only improving access to financial resources of these CSOs is critical, but also strengthening capacity of survival amidst the unprecedented challenges of the pandemic.

Ensuring critical engagement of women in decision-making arena

The contribution of women’s organisations is not limited to intermediary services. They have increased the civic space through their advocacy and campaign efforts over a wide range of inequality and gender issues. They have the essential knowledge and skills grounded in the realities of women and girls, and therefore, can provide knowledge and play a role beyond mere essential service delivery. Women’s CSOs have the vital resources to improve policy and decision-making environments, where policy can gain stronger legitimacy and effectiveness. Measures to ensure their meaningful participation should include responding to their advocacy and including them in formal mechanisms from implementation, and monitoring of the COVID-19 responses to public consultations at the national and local levels. Measures must also be taken to address structural barriers which prevent women from participating in leadership and other strategic positions, particularly in decision-making processes.
References


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The Gender Justice Hub Asia coordinates FES' work on gender justice in the Asia and Pacific region. Together with colleagues, feminists, and partners in the region we create spaces for exchange and mutual learning and develop transformative strategies for a more gender just future.

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