

A WILPF **GUIDE TO**

DOCUMENTING AND ANALYSING **RESPONSES TO THE COVID-19 CRISIS**





Table of Contents

Pay Attention! Analyse! Act!
Paying Attention to Inequalities4
Paying Attention to the Community Needs and Public Interest
Paying Attention to Economic Consequences and Bail-Out Programmes
Pay Attention to Disaster Capitalism
Pay Attention to Violence, Militarisation and Repressive Measures
Pay Attention to Solidarity

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A WILPF Guide to Documenting and Analysing Responses to the COVID-19 Crisis

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Pay Attention! Analyse! Act!

COVID-19 is a virus that has caused a global health crisis. But it has also revealed how systems of oppression, such as capitalism, neoliberalism, patriarchy, militarisation, colonialism, and racism, have brought destruction to our communities.

WILPF's feminist work on dismantling the oppressive systems is intimately linked to the steps needed to properly respond to the pandemic.

The first step in doing so requires understanding and making known the underlying causes of the challenges our communities face in responding to COVID-19. For that we need to surface and document our experiences – the good ones and the bad ones.

The second step is pooling our documentation and analysis so that local, regional and global experiences come together in a coherent, diverse, feminist and radical set of pathways for dismantling current structures and building new local, regional and global systems, centred around solidarity, equality, justice, environmental sustainability and demilitarised security and human well-being.

So, as the crisis enfolds, we need to Pay attention! Analyse! Act!

> Pay ATTENTION This exhateming the sexual femiliary of This guide contains some (none exhaustive) examples of what feminist peace activists should

be paying attention to and analysing, and what our scope of actions can be. However, each context is unique, both in its failures and its successes in

responding to the pandemic so the examples below should be seen as inspiration and not as limitations to what we need to be documenting, analysing and acting on.

Paying Attention to INEQUALITIES

While we need to build solidarity and foster an understanding that the challenges we face in our different contexts are rooted in the same systems of oppression, we need to be wary of the claim that "we are all in this together". We are not.

Without being unpacked, this claim will obscure the unjust system we live in. The access to resources we need to protect ourselves from the virus, and recover from its effects, physically, economically, socially, and psychologically, is not the same.

Not everybody has access to resources. Not everybody has access to housing, water facilities, hygiene products etc. and can isolate in a way that is recommended by the guidelines or, sometimes also required by the measures put in places in our countries. Not everybody will face same economic consequences of countries going into a lock-down. Not everybody can work from home. Not everybody will get paid while in the lock-down. Those that still have a workplace to go to often report on lack of appropriate protective measures so they are forced to choose between their health and their income.

Not everybody will be safe at home.

Staying/working from home, and thus minimising the risk of getting infected, is a privilege. The ability to do so is highly class, gender, ethnicity, and age-dependent. We need to be paying attention to how the inequalities materialise and what we need to do to dismantle them. We need to pay attention to intersections between them.

- Whose priorities and needs are catered for?
- What class/race/ethnicity/religion/age/gender identity/LGBTQ+ or other differences in access to healthcare and other support needed during the pandemic are noticeable?
- What do social and economic realities look like from a gender perspective? Are there any
 noticeable trends in current economic and political decision-making? Who can influence planning
 of the current measures?
- In many countries, governments are introducing restrictions on movement. This forces people to 'stock-up' food. It is important to consider who among us can afford to do that? What are class/race/gender/age differences in the ability to 'stock-up'?
- Which groups in your context are most marginalised and thus are at risk of not being able to protect themselves and the community through self-isolation measures?
- What, if anything, is being done to help them to meet the requirements and how is that being done? Whose resources are put to use? What resources could be used?

Paying Attention to the COMMUNITY NEEDS and PUBLIC INTEREST

To begin with we need to pay close attention to what sectors have proven to be essential in responding to this crisis and to document their ability to respond in an adequate way.

We need to be asking ourselves who can we not do without?

Since this is a global health crisis, paying special attention to the public healthcare sector and the resources within the sector is a given. The pandemic is putting our healthcare system under severe strain, so we need to start paying attention to things such as the number of healthcare professionals, the number of available beds and the overall shape of our healthcare:

- What is it that makes the public health-sector better/worse equipped to deal with the pandemic?
 What sort of resources did it need to be prepared for the outbreak? Where did the money go instead (e.g. militarism, fossil fuels, corruption, etc.)?
- What did the procurement of essential medical equipment look like before the pandemic? Were the hospitals depleted of them before?
- Are there enough medical professionals to respond to the crisis? If not, ask yourselves why not?
 In many countries, the depletion of resources from public healthcare sectors do not only mean
 less technical equipment but also massive labour emigration of medical professionals to countries
 which offer better salaries and working conditions. Some countries, often in Global North, very
 actively recruit medical professionals from developing countries but rarely help those countries
 invest in these sectors and help replenish their workforce.
- Don't forget to look at and document the ability of the healthcare sector to provide care for non-COVID-19 related cases. How does the access to other healthcare services look?
- How do people that do not have access to healthcare, e.g. they do not have healthcare coverage
 or access to nearby facilities, seek help and get help? Who can they turn to? Is healthcare made
 available to them despite lack of healthcare coverage? What consequences can you document?
- The authorities are now scrambling to increase the resources of the healthcare sector pay attention to how they are doing that. Is part of the 'increasing resources' engagement with the private healthcare institutions and if so in what way? Are they hiring/paying private institutions to

cover for the deficits in the public sector? In which case what is taking place is a transfer of public funds to private healthcare institutions. Or are they doing something else? In Spain for example, the government has chosen to temporarily nationalise private medical facilities. What is being done in your context? What role are private clinics playing?

Other than the healthcare sector, pay attention to what else is essential? E.g. psychosocial support, GBV shelters, social welfare, elderly care, education, grocery stores/markets, delivery services, public utilities and services such as public transport, public information system, trash collection, cleaners etc.

- What did investments in those sectors look like before? Were they equipped to deal with the outbreak? If not, why not? If they are responding properly, document what resources enable them to respond properly.
- Is there sufficient, objective and transparent information circulating and are the authorities ensuring that the information available reaches everybody?
- One of the most affected groups has been the population over 65 years of age, which has led many governments to limit the freedom of movement to people over 65 has the public age-care system been able to service those within its care while in lock-down?
- Pay attention to domestic violence and Gender-Based Violence (GBV). Many are reporting on horrific increases in domestic violence and GBV during the lock-down. How are those cases tracked and reported? Are any concrete actions being taken? Is there anything being done to support the victims? Are the GBV shelters equipped to provide support in circumstances like these? What would they need in order to provide the needed support, and is anybody in the government paying attention to it, and putting in place emergency plans to deal with this particular, deadly, effect of COVID-19?
- Who is expected to stay at home and take care of the children while schools and day-care centres
 are closed? Have the authorities considered the position of the parents (children-caring vs work)
 when making such a decision, and have they introduced any measures to alleviate the situation?
 Consider the situation of families where one or both (!) parents work in so called essential
 sectors?
- Consider who is visible and who is not:
 - » Who makes the decisions related to crisis management?
 - » Who makes sure that the essential aspects of our community life can be maintained?
 - Whose experiences are covered by the crisis-management decisions?
- Pay attention to the division of labour within the full spectrum of measures and activities being taken in response to the pandemic. How gendered is it (police, army, cashiers, medical staff, cleaners, decision-makers etc.)?
- Consider who is tasked to maintain the production of protective equipment such as masks (textile
 industry, mostly women)? Who are the people tasked to keep stocking the shelves in our stores;
 how well are they protected from the physical danger of COVID-19?

• What about their labour rights – are they paid extra for their role in ensuring the rest of the society does not go hungry, or get medical assistance? Are there any specific labour agreements put in place to protect the sectors that are at the front line of supressing the pandemic? What protective measures and protocols are put in place? If they organise for better protection, are they being penalised/fired/sanctioned?

Non-Essential Sector ...

There are many sectors in our economy that are not considered essential in responding to the pandemic. Many of them have come to a stand-still but others have been treated as essential, e.g. arms industry. Pay attention to:

- What segments of the non-essential sectors have come to a stand-still and what is their ability
 for economic recovery from the crisis (pay attention to how gendered those sectors are) e.g. the
 restaurant businesses, hairdressers, florists, people working in tourism (often seasonal, part-time
 workers), bus drivers, domestic-workers, etc.?
- Look at the arms industry. Are they working? Why are they working? Is there a continued flow of public funds into the arms industry? Have they been asked to produce goods required now to help with this crisis, i.e. protective gear or medical equipment?
- Look at the continued investment of public funds into other parts of the non-essential industry and consider whether these funds could have been diverted to the public sector at this crucial time.

Environment ...

In the midst of the public healthcare crisis there are still some positive developments. We see some signs of our environment recovering. We can document these positive side-effects and look for ways to use the momentum to shift to lower-carbon, less industrial economy. Pay attention to:

- What effects on the environment has the lock-down had in your local context?
- Is the government paying attention to that, and in what way?
- Are there any environmentally sustainable solutions emerging as an ad hoc measure due to the pandemic that can be promoted and institutionalised as part of recovery measures?

Paying Attention to ECONOMIC CONSEQUENCES and BAIL-OUT PROGRAMMES

There is a huge difference between how governments are discussing economic recovery. There is also a huge difference in available fiscal space (governments ability to borrow money) to mitigate the economic impact of the crisis. There is also a difference in the autonomy of countries to make their own economic decisions.

After a couple of weeks of lock-downs huge parts of our economy is standing still. Those that were already working precarious non-unionised jobs with low salaries and bad-working conditions will bear a disproportionate share of the economic crisis.

We need to pay attention to how the economic recovery is being discussed:

- Try to track resource allocation and investments at the moment of crisis and keep 'following the money' as the country/region starts recovering from the pandemic and moves into the phase of economic recovery?
- Consider community needs what will need to be invested in in the aftermath of COVID-19 so that people, not only businesses, recover? How does the discussion look in your context?
- Are the authorities taking into account their human rights obligations, in particular their obligations towards the realisation of social and economic rights, when planning investments?
- When they talk about the need to cut salaries, whose salaries are they talking about cutting? Whose are they not talking about?
- Many countries, as part of measures aiming at alleviating some of the most immediate consequences, are suspending payment of bills (rent, utilities, also loans) – who do these measures target: the private sector, business owners, big corporations or do they also cover individuals and households?
- Does the government have a proper (gender-sensitive) baseline or analysis of the needs in the community so that their measures address the diversified needs of the larger population and not only of those that can lobby the most?
- What do stimulus packages look like? Which sectors do they target? Is there any discussion on their gendered impact?
- Is there any 'bailing out' going on? Who is being 'bailed out'?

When 'bail-out' programmes are planned, public money is put to use to save private companies and their profits. The argument is 'saving the jobs' – but pay attention to how that is done. Are they really saving jobs or are they saving profits of the owners?

- Are those being 'bailed out' asked for anything in return, e.g. moratorium on firing people, no bailouts for tax avoiders etc.?
- Are they only bailing out big companies and corporations? What about micro and small-sized companies? Often these are run by women e.g. hairdressers, family restaurants, day-care centres.
- Pay attention to what constitutes "economic activity" in the country. Consider the role of remittances in the context. The probability is high that the levels will drop considerably since this is a global crisis. How will that affect the households? Do governments consider that at all?
- Many countries have vast informal sectors, often very gendered (e.g. women that provide child and elderly care; low-paid undervalued and precarious jobs). Informal work is also often frequent in rural areas where families live off what they can grow on their farms and sell on the local market but the markets are now being closed. Are the authorities considering the informal sector as they plan ahead for economic recovery? Can this be used as an opportunity to support local producers?
- How well is the country's welfare structure able to deal with the crisis? Look at unemployment and other benefits? Can they make a difference? If not, consider what it would take for the welfare structure to play a positive role in alleviating the worst effects.
- Where does the money for economic recovery programmes come from?
- Can money be re-directed from e.g military, or infrastructural projects such as highways, into e.g. healthcare and other essential public services? Is it being done? Why not?
- This is the time when the authorities will ask to fast track procurement procedures and we need to pay attention to that. This is a period when corruption will flourish, particularly in countries that have been struggling with it since before the outbreak. We need to pay attention to how procurement is being done, for what it is being used, and whose pockets are getting rewarded.

Financing of the Economic Recovery ...

While International Monetary Fund (IMF) and the World Bank Group have called for strengthening the capacity of health systems to cope with the pandemic and have opened up for a reassessment of debts for the poorest countries, there is little that demonstrates that either IMF or World Bank will be diverging from their 'private actors first' dogma – which means that a lot of the new loans and grants to the countries will still be tied to conditionalities aiming at structural reforms, again targeting regulations such as labour rights, subsidies, and public sector. Pay attention to how the government is financing the economic recovery programme:

- Is the government relying on loans? From whom?
- What will that mean for the country debt? What are the conditionalities tied to the loans/grants?
- Is there any space for the national government to negotiate with international financial institutions? Is there any space for the civil society to influence those negotiations?

Pay Attention to DISASTER CAPITALISM

This is a moment when capitalist elites, together with part of the governing elite, will try to push through policies that otherwise would meet resistance.

- Try to track what else is happening in the political and economic sphere while our attention is on the COVID-19. E.g. permits for extractive industry that were being contested before, or pushing through new policies, laws etc.; realisation of contested projects, etc.?
- What measures are adopted that are described as part of the response to COVID-19 but can in fact be about pushing through policies that would otherwise be criticised, e.g. cuts in taxes (what taxes are being cut, for how long, with what purpose)?
- Pay attention: who is earning money from this? Who is profiting from all the extra equipment and infrastructure that needs to be made available and put in place?

Pay Attention to VIOLENCE, MILITARISATION and REPRESSIVE MEASURES

State of emergency and similar measures cannot be used to justify limitations to human rights, to freedom of assembly and speech. Pay attention to:

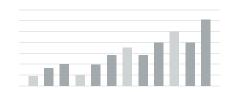
- The usage of repression (physical violence, arrests, fines, surveillance etc.) to enforce measures without properly designing mechanisms and ways for people to meet the requirements. What new technologies are being deployed by police or states to monitor or control populations during this crisis?
- Question the proportionality of the measures what do medical professionals say and what do politicians claim? Is there a difference between how the professionals say the crisis needs to be handled and what the authorities do?
- Not everybody will be able to follow all the measures introduced try to track who is policed and who is not (pay special attention to how the government is treating minorities, indigenous communities, migrants, etc.)?
- Are there any channels for you to communicate with the authorities, or competent human rights bodies, and warn against any wrong-doing?
- Pay attention if and how the military is being used e.g. if the military is used to set up isolation centres, ask yourself was there not any other part of civilian institutions that could have been tasked to do so? What military technologies are being deployed?
- Pay attention to the use of language. How is the pandemic being described? What purpose does that particular language serve?
- Pay attention to the far right? How are they using the crisis to push through their ideas? What sort of ideas are they pushing for (e.g. nationalistic ideas, xenophobia-based legislations, repressive policies targeting certain groups etc.)?

Pay Attention to SOLIDARITY

While the crisis is enfolding there are act of solidarity happening everywhere. People are pooling together their resources to help those that need an extra hand. They are recognising the massive efforts healthcare professionals and other first responders are doing; they publicly support them through applauses and the like. Now we have to make sure that the recognition of the fundamental role the public sector plays in responding to emergencies is properly documented, valued and carried into our short-term relief efforts and long-term recovery plans. Pay attention to:

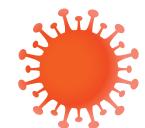
- What acts of solidarity are taking place? Who is organising the acts?
- How do they organise them?
- Imagine how those acts of solidarity could be institutionalised? How would solidarity demonstrated
 by the applauses for medical staff all around the world look like post-COVID-19, so that
 the recognition of the importance that medical professionals play in our lives translates into
 institutional policies? How do we make solidarity part of our system rather than an ad hoc activity
 that disappears after the crisis?
- Pay attention to public and private resources available and used. Pay attention to the ratio in the usage of public and private resources in responding.















Searching for Additional Resources?



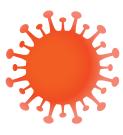
The COVID-19 crisis serves as an unfortunate example of the fault lines that WILPF has been exposing throughout our history. Discover articles written by WILPF members, sections, partners, staff and guest writers.



wilpf.org/covid-19











Notes

This is a guide on how we can document and analyse the underlying causes of the challenges our communities face in responding to the COVID-19. It highlights key aspects of the responses we need to be paying attention to: inequalities, community need and public interest, economic consequences and bail-out programmes, disaster capitalism, violence, militarisation and repression, and acts of solidarity.

In this guide, WILPF argues for the need to document our experiences, the good and the bad. When our local, regional and global experiences can come together in a coherent, diverse, feminist and radical set of pathways, we can start dismantling current structures and building new local, regional and global systems, centred around solidarity, equality, justice, environmental sustainability and demilitarised security and human well-being.

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